Child Care and Development Fund (CCDF) Plan

For

State/Territory: Arizona

FFY 2014-2015

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 – 9/30/2015. 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 printed herein of applicable laws and regulations 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.

Form ACF-118 Approved OMB Number 0970-0114 expires 05/31/2016

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PART 1

ADMINISTRATION

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This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

1.1 Contact Information

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

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

Identify the Lead Agency and Lead Agency's Chief Executive Officer 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), §98.10)

Name of Lead Agency: Arizona Department of Economic Security (DES)
Address of Lead Agency: 1717 W. Jefferson, P.O. Box 6123, Phoenix, AZ 85005
Name and Title of the Lead Agency's Chief Executive Officer: Clarence H. Carter,
Director

Phone Number: (602) 542-5757
Fax Number: (602) 542-5339
E-Mail Address: CCarter@azdes.gov
Web Address for Lead Agency (if any): www.azdes.gov

1.1.2. Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, 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. (§§98.16(a) and (c)(1))**

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Brad Willis
Title of CCDF Administrator: Program Administrator, DES Child Care Administration

Address of CCDF Administrator: <u>1789 W Jefferson, SC 801A, Phoenix, AZ 85007</u>
Phone Number: (602) 542-4248
Fax Number: (602) 542-4197
E-Mail Address: BWillis@azdes.gov
Phone Number for CCDF program information
(for the public) (if any): (602) 542-4248
Web Address for CCDF program
(for the public) (if any): https://www.azdes.gov/childcare/
Web address for CCDF program policy manual:
(if any): n/a
Web address for CCDF program administrative rules:
(if any): http://www.azsos.gov/public_services/Title_06/6-05.htm

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

Name of CCDF Co-Administrator: n/a
Title of CCDF Co-Administrator: n/a
Address of CCDF Co-Administrator: n/a
Phone Number: n/a
Fax Number: n/a
E-Mail Address: n/a
Description of the role of the Co-Administrator: n/a

1.2 Estimated Funding

1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?
The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

> FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching): $ 112,577,100
> Federal TANF Transfer to CCDF: $ 0
> Direct Federal TANF Spending on Child Care: $ 2,717,800
> State CCDF Maintenance-of-Effort Funds: $ 10,032,936
> State Matching Funds: $ 18,422,178

Reminder – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

1.2.2. Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)?
Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark ☐ N/A here.

Note: The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

☒ Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.
    If checked, identify source of funds:

A combination of public funds from identified sources that become available throughout the year.

        If known, identify the estimated amount of public funds the Lead Agency will receive: $_____
☐ Private Donated Funds to meet the CCDF Matching Fund requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))
        If checked, are those funds:
                ☐ donated directly to the State?
                ☐ donated to a separate entity(ies) designated to receive private donated funds?
                        If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact, and type _____
        If known, identify the estimated amount of private donated funds the Lead Agency will receive: $_____
☐ State expenditures for Pre-K programs to meet the CCDF Matching Funds requirement. If checked,
        Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): _____
                If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services: _____
        If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: $_____
        Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: _____
☐ State expenditures for Pre-K programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,
        ☐ The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1).
        Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): _____
                If percentage is more than 10% of the MOE requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care: _____
                If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: $_____

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

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015. Funding estimate is limited to FY 2014. In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Infant/Toddler Targeted Funds $ 2,771,000	Provider Quality Incentive Payments	To improve the affordability of high quality child care.	Increasing the number of facilities that otherwise would not maintain accreditation and encouraging already accredited facilities to serve children from CCDF eligible families.
	Recruiting Small Family Child Care Homes	To assist communities addressing the need for adequate supply of quality child care.	Maintaining adequate supply of child care facilities throughout the State of Arizona.
	Child Care Resource and Referral System, including a Provider Registry for Unregulated Providers	To improve the availability of high quality child care.	Providing information to parents in search of child care with information about providers that meet their needs.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Infant/Toddler Targeted Funds (continued)	Child Care Provider Training	To improve the quality of child care; to assist communities in addressing the need for adequate supply of quality child care.	Supporting child care providers to remain licensed/certified; maintaining adequate supply of child care facilities and staff throughout the State of Arizona.
	Child Care for Children Residing in Residential Homeless/Domestic Violence Shelters	To improve the quality, availability and affordability of child care.	Meeting the child care needs for special populations
	Support of Licensing and Monitoring Activities	To improve the quality of child care.	Maintaining staffing levels to ensure adequate and timely inspections.
	Other appropriate quality activities that may be identified	To improve the quality, availability and/or affordability of child care.	To be determined.
School-Age/Child Care Resource and Referral Targeted Funds $ 463,000	Supporting School Age Programs	To improve the quality and availability of child care.	Provide leadership and focus for promoting out-of-school time programs in Arizona.
	Other appropriate quality activities that may be identified	To improve the quality, availability and/or affordability of child care.	To be determined.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Quality Expansion Targeted Funds $ 4,993,000	Post-Secondary Education	To improve the quality of child care	Provide training to enhance professional caregiving skills of child care providers in Arizona.
	Recruiting Small Family Child Care Homes	To assist communities addressing the need for adequate supply of quality child care.	Maintaining adequate supply of child care facilities throughout the State of Arizona.
	Child Care Resource and Referral System, including a Provider Registry for Unregulated Providers	To improve the availability of high quality child care.	Providing information to parents in search of child care with information about providers that meet their needs.
	Child Care Provider Training	To improve the quality of child care; to assist communities in addressing the need for adequate supply of quality child care.	Supporting child care providers to remain licensed/certified; maintaining adequate supply of child care facilities and staff throughout the State of Arizona.
	Program Improvement; The Arizona Self Study Project	To improve the quality of child care	Increasing the overall number of accredited child care facilities.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Quality Expansion Targeted Funds (continued)	Child Care for Children with Special Needs	To improve the quality, availability and affordability of child care.	Meeting the child care needs for special populations.
	Child Care for Children Residing in Residential Homeless/Domestic Violence Shelters	To improve the quality, availability and affordability of child care.	Meeting the child care needs for special populations.
	Support of Licensing and Monitoring Activities	To improve the quality of child care.	Maintaining staffing levels to ensure adequate and timely inspections.
	Coordination Activities Between State Agencies and Between Other Entities	To improve the quality, availability and affordability of child care.	Improving intra and inter-agency communications.
	Other appropriate quality activities that may be identified	To improve the quality, availability and/or affordability of child care.	To be determined.
Quality Funds (not including Targeted Funds) $5,400,000	Quality Improvement and Rating System; Arizona Early Childhood Development and Health Board (First Things First)	To improve the quality, availability and affordability of child care.	Improving child care environments, staff training, and knowledge of Early Learning Guidelines. Providing information to parents in search of child care.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Quality Funds (continued)	Other appropriate quality activities that may be identified	To improve the quality, availability and/or affordability of child care.	To be determined.

1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

☐ No, the Lead Agency will not distribute any quality funds directly to local entities
☐ Yes, all quality funds will be distributed to local entities
☐ Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities _____
☒ Other. Describe. _____

Quality funds may be managed by the Lead Agency or by other state agencies. An estimate of the amount that may be managed by each is unknown at this time.

1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.
The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

For services performed by Lead Agency Staff

The Lead Agency has developed an Administrative Rule and extensive policies to guide staff.

All newly hired staff attends in-person training that lasts approximately five weeks. At this hands-on training, staff learns the rules, how to apply policy based on case scenarios, and how to navigate properly the Child Care automated system. Staff is also briefed on proper interview techniques, the appeals process and other supportive services that are available to the families.

Supervisors conduct case reviews which are built in to staff performance evaluations for all case management staff to ensure cases are being completed properly. Any errors are discussed to make certain staff understand the proper application of policy. Additionally, new staff members, after returning from training, are assigned a mentor to assist with any questions that may arise.

The Lead Agency operates a "Help Desk" for staff members to call if they are uncertain about the proper application of the policy or automated system. Questions received are tracked and classified. The Policy Unit sends reminders to staff; reports for managers are prepared based on a review of the questions received.

The child care system is designed to ensure data integrity through cross-matching of data with other Lead Agency administrations such as Family Assistance Management Information System (FAMIS) and Unemployment Insurance Base Wage. The system will not allow an authorization to a TANF eligibility code if the family is not on TANF, or will provide exception reports when comparing income reported to Child Care against the employer reported income for an individual.

Additionally, the DES Child Care Administration conducts refresher trainings and training sessions on new policy and systems initiatives. These trainings provide support to Case Managers on an ongoing basis.

Finally, the utilization of reconciliation reports identifies, and/or resolves case processing discrepancies. Reports of this nature assist management in identifying potential errors made by field staff during the eligibility determination or service authorization processes. Identified errors are either corrected on a case-by-case basis in the field, or statewide policy clarifications are issued for broader impact regarding error prevention or resolution.

Fiscal Reporting

The Lead Agency's automation system, Financial Management and Control System, is used in capturing expenditure data necessary to compile all required financial reports. The system has controls in place ensuring that all information is accurate and that all CCDF funds are expended according to all applicable state and federal laws and regulations. The Financial Services Administration (FSA), under the Office of the Director, is responsible for reporting all financial information. FSA has procedures in place to ensure that all reports are accurate, timely, and submitted in the specified manner.

Data Reporting

The Lead Agency's automation system, the Arizona Child Care Administration Tracking System, is used in capturing client and provider data necessary to compile all required client and provider reports. The system has controls in place ensuring that all information is accurate and that all CCDF client and provider records are maintained according to all applicable state and federal laws and regulations. The Child Care Administration (CCA) under the Division of Employment and Rehabilitation Services (DERS) is responsible for the reporting of all client and provider data. CCA has procedures in place to ensure that all reports are accurate, timely and submitted in the specified manner. CCA submits the ACF-800 and the ACF-801 to ACF as required.

Error Rate Reporting

Several controls are in place to ensure that Arizona's improper payment documentation meets the requirements set forth in the Child Care and Development Fund error rate reporting requirements. First cases are selected using an Access based random number generator. Then, case files are gathered by staff that do not manage the cases. A team made up of three individuals who are not involved with the eligibility determination process reads the cases.

Cases with errors are discussed among the team members to ensure that they have consensus regarding the existence of the error. At least ten percent of the cases

undergo second level reads. All data is checked and crosschecked by team members to ensure that computations are correct.

For Contracted Services

Entities that provide Quality activities may be governmental, community-based organizations, and non-profit or private, for profit, entities. In order to ensure that the most appropriate, effective, and efficient services are provided, DES may solicit Request for Proposals and award contracts on a competitive basis and/or enter into Inter-Governmental-Agreements or Interagency Service Agreements to have activities provided.

Contracting organizations certify in writing to adhere to guidelines developed by DES in the delivery and administration of each service. The contracts include specific performance measures and, where appropriate, payment for services is based on the delivery of discrete units of service.

Each contract details specific expectations for service delivery and reporting requirements. Contractors report monthly to individual contract administrators who monitor contract compliance, review services delivered and approve payment on invoices. At a minimum, contract administrators perform an on-site contract compliance review annually.

CCDF contracted services that are awarded through a competitive bidding process are awarded via Arizona's automated e-Procurement system, ProcureAZ. Competitively awarded contracts are typically renewed on an annual basis and competitively re-solicited at least every five years.

1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.
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 (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor**.
The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

Entities that act as sub-recipients may be governmental, community-based organizations, and non-profit or private, for profit, entities. In order to ensure that the most appropriate, effective, and efficient services are provided, DES may solicit Request for Proposals and award contracts on a competitive basis and/or enter into Inter-Governmental-Agreements or Interagency Service Agreements to have activities provided.

Contracting organizations certify in writing to adhere to guidelines developed by the DES in the delivery and administration of each service. The contracts include specific performance measures and, where appropriate, payment for services is based on the delivery of discrete units of service.

Each contract details specific expectations for service delivery and reporting requirements. Contractors report monthly to individual contract administrators who monitor contract compliance, review services delivered and approve payment on invoices. At a minimum, contract administrators perform an on-site contract compliance review annually.

Sub-recipient services that are awarded through a competitive bidding process are awarded via Arizona's automated e-Procurement system, ProcureAZ. Competitively awarded contracts are typically renewed on an annual basis and competitively re-solicited at least every five years. Sub-recipient services are subject to the Single Audit Act per OMB Circular A-133.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart 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 (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

Type of Activity	Identify Program Violations	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))	☒	☒
Share/match data from 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)	☒	☐
Review of attendance or billing records	☒	☐
Audit provider records	☒	☐
Conduct quality control or quality assurance	☒	☒

Type of Activity	Identify Program Violations	Identify Administrative Error
reviews		
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	☒	☐
Conduct supervisory staff reviews	☒	☒
Conduct data mining to identify trends	☒	☒
Train staff on policy and/or audits	☒	☒
Other. Describe _____	☐	☐
None	☐	☐

For any option the Lead Agency checked in the chart above other than none, please describe

The DES Child Care Administration prevents, identifies, and reduces improper payments by engaging in the following activities:

- Conduct CCDF Error Rate Reviews in accordance with 45 CFR 98.100 to 102 (Arizona is a 2nd year state; the CCDF Error Rate Report is due 6/30/15).

- Routinely share and review systems data with the State's Family Assistance Management Information System (FAMIS) (for TANF, Food Stamps, and Medical Assistance cases), and the Unemployment Insurance (UI) Base Wage automated system. This will identify and resolve discrepant income or household information reported by clients to other assistance programs or reported as wages by employers to the state of Arizona for UI tax purposes.

- Routinely access online child support payment information from the DES Division of Child Support Services regarding actual child support payment histories and disbursement schedules for known child care clientele.

- Utilize the DES Office of Internal Affairs, as needed, to substantiate household circumstances and resolve discrepancies regarding information reported by clients and providers, and to substantiate improper billings.

- Train child care providers on proper billing techniques and conducting reviews on initial billing submittal to ensure that contract provisions are met.

- Conduct routine monitoring of existing provider billings by comparing parental sign in/sign out documents to billing claims to determine if the amount billed is substantiated.

- Run system reports that flag certain providers whose payments exceed anticipated billings. Further review of billing practices is initiated based on reports.

- Utilize a case read instrument to identify errors in the elements of the eligibility determination, service calculation, and service authorization processes. First line supervisors conduct monthly case reads on a random sample of cases to promote consistent application of eligibility rules and procedures on a statewide basis.

- Conduct a comprehensive five-week course of integrated policy and systems training on the Child Care Program to prevent case management errors. All child care Case Managers are required to participate in the Child Care Basic Skills course upon being hired by the DES Child Care Administration. Additionally, the DES Child Care Administration conducts refresher trainings and training sessions on new policy and systems initiatives to provide support to Case Managers on an ongoing basis.

- Utilize reconciliation reports to identify/resolve case processing discrepancies. Reports of this nature assist management in identifying potential errors made by field staff during the eligibility determination or service authorization processes. Identified errors are either corrected on a case-by-case basis in the field, or statewide policy clarifications are issued for broader impact regarding error prevention or resolution.

- Ensure that staff has access to full time policy and systems help desks for direct case management support. Staff can call with policy or system questions to ensure appropriate application of policy and for assistance in determining eligibility and payment.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error? Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and 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 (98.60(i)).**

Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount (See description below)	☒	☒	☐
Coordinate with and refer to other	☒	☒	☐

Strategy	UPV	IPV and/or Fraud	Administrative Error
State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe (See description below)			
Recover through repayment plans	☒	☒	☐
Reduce payments in subsequent months	☒	☒	☐
Recover through State/Territory tax intercepts	☒	☒	☐
Recover through other means. Describe _____	☐	☐	☐
Establish a unit to investigate and collect improper payments. Describe composition of unit (See description below)	☒	☒	☐
Other. Describe _____	☐	☐	☐
None	☐	☐	☐

For any option the Lead Agency checked in the chart above other than none, please describe

The DES Child Care Administration validates, tracks, and collects improper payments by pursuing overpayment recoupment with clients for all client caused overpayments, and providers for all provider caused overpayments; and by pursuing criminal prosecution in all cases of suspected fraud.

Although there is no minimum dollar amount to trigger overpayment recovery efforts, the DES Child Care Administration can elect not to pursue overpayment recovery when the cost of recoupment equals or exceeds the amount of the overpayment.

The DES Child Care Administration coordinates with the DES Office of Accounts Receivable and Collections (OARC) for collection of overpayments that are the result of unintentional program violations; however, if the overpayment amount exceeds $2,000, OARC automatically refers the case to the Criminal Prosecution unit in the Attorney General's Office to determine whether fraud is indicated.

The DES Child Care Administration also coordinates with the DES Office of Special Investigations and the Office of Internal Affairs when an intentional program violation (IPV) is suspected. If the resultant investigative report indicates potential fraud, the case will also be referred to the Criminal Prosecution Unit in the Attorney General's Office.

In cases where there is insufficient evidence to support IPV/criminal prosecution, the case is remanded back to OARC to pursue overpayment recoupment administratively.

For provider caused overpayments, the DES Child Care Administration does not go through OARC for child care providers that hold a valid subsidy reimbursement contract, but simply recovers the overpaid amounts from future provider reimbursements until the overpaid amount has been repaid. If a provider no longer holds a subsidy contract, the overpayment is referred to OARC for collection activities.

1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

☐ None

☐ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified _____

☒ Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified.   The DES Child Care Administration reserves the right to terminate contracts with child care providers that routinely submit improper payment requests. There is no internal appeal process.

☒ Prosecute criminally

☒ Other. Describe.   The DES Child Care Administration validates, tracks, and collects improper payments by pursuing overpayment recoupment with clients for all client caused overpayments, and providers for all provider caused overpayments; and by pursuing criminal prosecution in all cases of suspected fraud.

1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.

Territories not required to complete the Error Rate Review should mark ☐ N/A here.

Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
1) DES CCA will continue to review policies and procedures for areas with high errors and make adjustments, provide clarifications and additional training to staff on how to apply policy properly.	1) Income Calculation errors; Specifically, child support, self-employment, and unit calculation errors.	1) Training was provided to staff on the correct application of child support policies. Unit calculation policies were revised to simplify processes, and self-employment policies are being reviewed for potential revision.	1) Unknown as some of the changes may require rule promulgation, which could take up to 24 months.

Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
2) In addition, all policies and procedures are being reviewed to determine if there are unnecessary steps or if there are simpler ways to approach the eligibility determination based on the administrative rules and access to information and current technology. Policies and procedures are being rewritten in plain language to ensure a higher level of comprehension by staff.	2) N/A (broad strategy addresses all error types).	2) An ongoing review and rewrite of all policies and procedures has been started. Policies are being rewritten in plain language and all aspects of the procedures used by staff determining eligibility are being reviewed to simplify those procedures where possible.	2) Process is ongoing.
3) DES CCA has also identified additional targeted training (e.g. child support income calculation, self-employment policy, unit authorization, etc.) that needs to be provided to staff based upon the errors that were found.	3) Income Calculation errors; Specifically, child support, self-employment, and unit calculation errors.	3) Training was provided to staff on the correct application of child support policies. Unit calculation policies were revised to simplify processes, and self-employment policies are being reviewed for potential revision.	3) Process is ongoing.
4) There are also several forms that will be reviewed to determine if modifications made to the forms will result in fewer errors.	4) N/A (broad strategy to address all error types).	4) Review of all forms is ongoing.	4) Process is ongoing.
5) Supervisors and case reviewers will continue to review cases on a	5) N/A (broad strategy to address all error	5) The supervisory case review process and a second level	5) Process is ongoing.

Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
monthly basis to monitor progress, identify emerging issues, and to provide immediate feedback to staff on their case processing in order to prevent future errors.	types).	review of these case reviews was developed and implemented in September 2009. The process used to determine the Federal Error rate is used to monitor progress.	

1.4. Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

Definition: *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the <u>development of the State or Territory CCDF Plan</u>. <u>At a minimum, Lead Agencies must consult with representatives of general purpose local governments. </u>(§§98.12(b), 98.14(a)(1))

1.4.1. Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
☒	**Representatives of general purpose local government (required)** This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	*Agencies/Entities consulted with in the development of the CCDF Plan include:* *DES Child Care Advisory Committee, Tri-Agency Committee, DES Early Childhood Taskforce, Early Childhood and Provider Network Meetings, and the Arizona Early Childhood Development and Health Board (also known as First Things First).* *Local governments; other federal, state, local, tribal and private agencies providing child care and early childhood development services such as: Head Start programs; resource and referral agencies; philanthropic organizations that focus on early childhood issues, child welfare advocacy groups; tribal*

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	organizations; family child care providers; human service advocacy organizations; employer supported child care programs; Child and Adult Care Food Program sponsors; parents and consumers; school boards; before and after school programs; public school child care programs; business groups; sectarian organizations and child care programs; Child Development Associate programs; and organizations that accredit child care programs. *Additionally, representatives from state agencies including: the Governor's Office for Children, Youth and Families (GOCYF), the Arizona Early Childhood Development and Health Board, the Arizona Department of Education (ADE) and the Arizona Department of Health Services (DHS), also participate in the CCAC. (The GOCYF includes the Division of School Readiness, Division for Community and Youth Development, Division for Children, Division for Women, and the Division for Substance Abuse and Prevention. The ADE administers Preschool, Title I, and the Child and Adult Care Food program as well as administering the Head Start State Collaboration grant from the US Department of Health and Human Services. The DHS administers the Bureau of Child Care Licensing, Behavioral Health Services, and the Office of Women and Children's Health.)* *<u>Following is a description of how these agencies/entities were consulted with in developing the CCDF Plan:</u>* *In Arizona, child care services are administered at the state level, consistent with state legislation and budgetary appropriations. Organizations and individuals have the opportunity to communicate and provide input to their local elected officials in*

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	order to influence legislation and appropriations for child care services and programs. Utilizing input and direction from various sources, the Arizona Department of Economic Security (DES) also plans for the provision and delivery of CCDF services in a manner that is responsive to the needs of Arizona's communities.
	Within this subsection, a description is provided of some of the numerous committees and boards that are involved at various levels in planning and/or provision of early care and education services and who consult in the development of the CCDF State Plan. These include: the DES Child Care Advisory Committee, Tri-Agency Committee, DES Early Childhood Taskforce, Early Childhood and Provider Network Meetings, and the Arizona Early Childhood Development and Health Board (also known as First Things First). Following are descriptions of the purpose and efforts of these committees and boards. Information is specifically provided in terms of consultation and coordination efforts for each entity involved.
	DES Child Care Advisory Committee – For issues related to ongoing service delivery and development of the CCDF State Plan, DES consults with the Child Care Advisory Committee (CCAC), which typically meets four times per year. The CCAC includes individuals that represent statewide organizations with local affiliations, tribes, cities, and councils of governments that administer federal early childhood services. The CCAC is provided with information on caseload and cost of care, issues regarding service delivery and any other available information that affect early care and education programs in the state. The CCAC provides recommendations to DES on programs

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	and on activities and services to improve the quality and availability of child care, which are funded using CCDF Quality earmarks and Set-Asides and which are feasible given statutory authority and availability of appropriated funds. *DES Early Childhood Taskforce - The DES is atypical in that it combines most of the state's social service programs within a single agency. These include: Child Care Assistance, Employment services, Part C of the federal Assistance to States for the Education of Children with Disabilities and the Early Intervention Program for Infants and Toddlers with Disabilities program, nutrition assistance, cash assistance (TANF), child support enforcement, and child welfare. The DES Early Childhood Task Force was established to mobilize DES early childhood programs, resources and initiatives in a manner that promotes interdepartmental coordination and communication and facilitates interagency collaboration and system integration in concert with many of DES strategic initiatives.* *Additionally, through participation in local and statewide committees and boards, DES consults with representatives of local governments who serve in various capacities.*
For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.	
☒ State/Territory agency responsible for public education This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	*DES consults with the Arizona Department of Education (ADE) in development of the CCDF State Plan through their participation on the Child Care Advisory Committee and through regular on-going communication regarding other issues and mutual areas of concern. ADE also coordinates Section 619 for preschool for the state.*
☒ State/Territory agency responsible for programs for children with special needs	*The DES is the lead agency for the Part C program (Arizona Early Intervention Program - AzEIP). The AzEIP is a*

Agency/Entity		Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	*statewide system of supports and services for families of infants and toddlers, birth to three years of age, with disabilities or delays. The purpose of early intervention is to help families help their children develop to their full potential. The DES Child Care Administration consults and communicates regularly with AzEIP, not only for the purpose of gaining input on the development of the State Plan, but also to improve services and service coordination for infants, toddlers and their families.*
☒	State/Territory agency responsible for licensing (if separate from the Lead Agency)	*The Arizona Department of Health Services, Bureau of Child Care Licensing (DHS-BCCL), is responsible for both the licensing of child care centers and the certification of child care group homes and participates in the DES Child Care Advisory Committee. Additionally, DHS-OCCL has provided consultation and input into the development of the CCDF State Plan particularly with respect to areas that discuss activities to ensure the health and safety of children in child care.*
☒	State/Territory agency with the Head Start Collaboration grant	*The Arizona Department of Education is the state agency responsible for the Head Start Collaboration Grant. The Deputy Associate Superintendent, Early Childhood Education, School Effectiveness Division, is the Director of the Arizona Head Start Collaboration Office and sits on the DES Child Care Advisory Committee.*
☒	Statewide Advisory Council authorized by the Head Start Act	*The Arizona Early Childhood and Development Health Board (also known as First Things First) has been designated as the State Advisory Council. The Department of Economic Security has been designated through state statute as a mandatory member of the First Things First board. Also, the Chief Program Officer for First Things First sits on the DES Child Care Advisory Committee.*
☒	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental	*In addition to consulting with various entities in drafting the CCDF State Plan, DES provides representatives of local*

Agency/Entity		Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	services	*governments, including Tribal organizations, the opportunity to comment on the provision of services under the CCDF Plan at public hearings.*
☒	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	*In addition to having regular communications with the DES Child Care Administration on shared issues, representatives from the Arizona Department of Education, which administers the CACFP, participate in the Child Care Advisory Committee.*
☒	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	*The Arizona Department of Health Services participates in the Child Care Advisory Committee.*
☒	State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health)	*The Arizona Department of Health Services participates in the Child Care Advisory Committee.*
☒	State/Territory agency responsible for child welfare	*In Arizona, DES is the lead agency responsible for administration of the child welfare programs through the Division of Children, Youth & Families (DCYF) which oversees various programs including child protective services, foster care, and, adoptions. The DES Child Care Administration (CCA) is responsible for the planning and policy of the CCDF and the day-to -day operation of child care programs, which will provide services to families involved with and or receiving services from DCYF. CCA seeks input from DCYF on the development of the State Plan through regular ongoing internal communications.*
☐	State/Territory liaison for military child care programs or other military child care representatives	
☒	State/Territory agency responsible for employment services/workforce development	*In Arizona, DES is the lead agency responsible for administration of employment services/workforce development through the Division of Employment and Rehabilitation Services (DERS) of which the Child Care Administration is a component. Also within DERS are the Rehabilitation Services Administration and the Employment Administration (which*

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	consists of the employment and training services that support and assist both TANF and non-TANF individuals in securing and maintaining employment). Consultation within DERS is achieved through shared communication and identification of issues that relate to the provision of child care services to families that are receiving other services from the respective DERS Administrations.
☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	*In Arizona, DES is the lead agency responsible for administration of the TANF program through the Division of Benefits & Medical Eligibility (DBME), which oversees three administrations with varying responsibilities to support the DES mission to promote the safety, well-being, and self-sufficiency of children, adults, and families. The DES Child Care Administration (CCA) is responsible for the planning and policy of the CCDF and the day-to-day operation of child care programs, which will provide services to TANF cash assistance recipients and other families eligible for services. CCA seeks input from DBME on the development of the State Plan through regular ongoing internal communications.*
☒ Indian Tribes/Tribal Organizations ☐ N/A: No such entities exist within the boundaries of the State	*In addition to having tribal representation on the CCAC, DES participates in and funds the Tribal Early Childhood Working Group that has been established and is facilitated by the Inter Tribal Council of Arizona. This group's membership includes representatives from Indian Nations/reservations in Arizona who are directly involved in the administration and development of early childhood development and child care programs. The group has adopted a set of guidelines identifying the improvement of coordination and quality child care as two of its goals. The DES uses this forum to communicate with Tribal child care and CCDF grantees to discuss issues and needs, to provide technical assistance as requested, and to seek input on the*

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
	development of the CCDF State Plan. DES also meets as needed with individual representatives of Tribal TANF and Tribal employment programs in order to discuss child care issues and needs. Additionally, DES has met with and will continue to meet with representatives of the Navajo Nation's CCDF program and Program for Self Reliance (TANF) and the Hopi Tribe's CCDF program in order to increase awareness of each grantee's program and to explore possible mechanisms that would enhance service delivery as described in the State Plan.

	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
☒	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	*Through their participation in the DES Child Care Advisory Committee, DES works with the Arizona Center for Afterschool Excellence, a private, not for profit organization whose mission is to improve access to high quality, extended learning opportunities for all Arizona children and youth through professional development, advocacy, and community capacity building.* *BUILD is national organization that provides resources and technical to support states in building early childhood systems. BUILD AZ is a new partnership that is working to engage additional multi-sector champions for early childhood to broaden the conversation and increase support for a comprehensive, sustainable early childhood system. The BUILD AZ group is sponsored by a collaborative of funders including Helios Education Foundation, the Steele Foundation, the Virginia G. Piper Trust and Valley of the Sun United Way. The group will utilize a variety of existing plans--including the AZ Early Childhood Task Force Model System document, to begin prioritizing some potential roles that this new partnership can move forward.* *The BUILD Core Group and the Statewide Steering Committee have identified four separate workgroups; Health, Quality Early Learning, Grade level reading/Early Literacy and Communications/Engagement. The work groups will review current efforts and gaps in the Work Group focus areas and identify 1-2 specific strategies for Build AZ to consider moving forward.* *CCA is participating in the BUILD initiative as members of the Core Group, Statewide Steering Committee and the Quality Early Learning groups.*

	Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
☒	Provider groups, associations or labor organizations	*A representative from the Arizona Child Care Association is a member of the Child Care Advisory Committee. The Arizona Child Care Association represents private, licensed child care centers statewide, promotes affordable, quality early care and education that meets the needs of Arizona's families and children. Additionally, the Arizona Family Childcare Association is represented on the Child Care Advisory Committee. The Arizona Family Childcare Association represents family child care providers throughout Arizona, providing support and mentoring that promotes high quality care for all children.*
☐	Parent groups or organizations	
☒	Local community organizations (child care resource and referral, Red Cross)	*The following community organizations may participate in the Child Care Advisory Committee:* *Early Childhood and Provider Network, DES Community Network Teams, private agencies providing child care and early childhood development services such as: Head Start programs; resource and referral agencies; child welfare advocacy groups; family child care providers; human service advocacy organizations; employer supported child care programs; Child and Adult Care Food Program sponsors; parents and consumers; school boards; before and after school programs; public school child care programs; business groups; sectarian organizations and child care programs; Child Development Associate programs; and organizations that accredit child care programs.*
☐	Other	

1.4.2. 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), §98.14(c))
At a minimum, the description should include:

   a) Date(s) of notice of public hearing: May 22, 2013 **Reminder** - Must be at least 20 days prior to the date of the public hearing.

b) How was the public notified about the public hearing? On May 22, 2013 the DES Child Care Administration filed formal notice of the Public Hearing in accordance with Arizona Revised Statutes 38-431.02. The Public Notice was also posted in all DES Child Care Administration local offices. Notice of the Public Hearings was posted in all DES Child Care offices throughout the state and on the DES Website. Copies of the notice were also mailed or e-mailed to other parties such as Tribal and local units of government, the DES Child Care Advisory Committee, and other groups that may have an interest in child care

c) Date(s) of public hearing(s): 6/11/2013
   Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).

d) Hearing site(s): Hearings were held in Phoenix, Arizona, and in Tucson, Arizona.

e) How was the content of the Plan made available to the public in advance of the public hearing(s)? Copies of the draft Plan were available for review, prior to the hearings, at DES District Child Care Offices and on the DES Website. This information was specified in the Notice of the Public Hearings.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All information provided by the public was captured and considered for possible impacts and implementation based on current statutory language and appropriation levels. Additionally, any factual errors, confusing language, or other reasonable edits suggested in the public hearings were corrected or clarified.

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.
For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules. The public hearings were held in more than one location and were scheduled during evening hours to accommodate parent and provider work schedules.

1.5. Coordination Activities to Support the Implementation of CCDF Services

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

> **Definition** - *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of how governments are organized for each State are provided at: http://www2.census.gov/govs/cog/all_ind_st_descr.pdf.

1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
☒	Representatives of general purpose local government **(required)** This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.	*The DES Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. For issues related to ongoing service delivery, DES meets with the Child Care Advisory Committee (CCAC), which typically meets four times per year. The CCAC includes individuals that represent statewide organizations with local affiliations, tribes, cities, and councils of governments that administer federal early childhood services. Additional representation on the CCAC includes:* *Local governments; other federal, state, local, tribal and private agencies providing child care and early childhood development services such as: Head Start programs; resource and referral agencies; child welfare advocacy groups; tribal organizations; family child care providers; human service advocacy organizations; employer supported child care programs; Child and Adult Care Food Program sponsors; parents and consumers; school boards; before and after school programs; public school child care programs; business groups; sectarian organizations and child care programs; Child Development*	*The CCAC is provided with information on caseload and cost of care, issues regarding service delivery and any other available information that affects early care and education programs in the state. The CCAC provides recommendations to DES on programs and on activities and services to improve the quality and availability of child care, which are funded using CCDF Quality earmarks and Set-Asides.*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		Associate programs; and organizations that accredit child care programs. Also participating in the CCAC are representatives from state agencies including, the Arizona Early Childhood Development and Health Board (also known as First Things First), the Governor's Office for Children, Youth and Families (GOCYF), the Arizona Department of Education (ADE) and the Arizona Department of Health Services (DHS). (The GOCYF includes the Division for Community and Youth Development, Division for Children, Division for Women, and the Division for Substance Abuse and Prevention. The ADE administers Preschool Handicapped, Title I, and the Child and Adult Care Food programs. The DHS administers the Bureau of Child Care Licensure, Behavioral Health Services, and the Office of Women and Children's Health.)	
☒	State/Territory agency responsible for public education (**required**) This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education;	*DES coordinates with the Arizona Department of Education (ADE) through their participation in the Child Care Advisory Committee and through regular on-going communication regarding other issues and mutual areas of concern.*	*Through communication with representatives from ADE, DES receives and shares information regarding programmatic issues, the status of pre-kindergarten programs and other areas of mutual concern.*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
☒	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (**required**)	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*
☒	State/Territory agency responsible for public health (**required**) This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*
☒	State/Territory agency responsible for employment services / workforce development (**required**)	*The Child Care Administration is an administration within the DES Division of Employment and Rehabilitation Service (DERS). Also within DERS are the Rehabilitation Services Administration and the Employment Administration (which consists of the employment and training services that support and assist TANF and non-TANF individuals secure and maintain employment). Coordination within DERS has resulted in shared communication and identification of issues that relate to the provision of child care services to families that are receiving other services from the respective DERS Administrations. Coordination with Employment and Workforce Development services and*	*Coordination of services within DES regarding employment and child care services ensures that TANF recipients have needed supports to achieve independence from TANF, and that former TANF recipients can obtain and retain employment, and avoid returning to welfare.*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		TANF eligibility is handled internally through policies and procedures developed specifically to ensure that appropriate child care services are provided for TANF recipients.	
☒	State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies (**required**)	*In Arizona, DES is the lead agency responsible for administration of the TANF program and Employment services/Workforce Development. The DES Child Care Administration (CCA) is responsible for the planning and policy of the CCDF and the day-to-day operation of child care programs, which will provide services to TANF cash assistance recipients and other families eligible for services.*	*Enhanced data sharing between the Child Care automated system and the FAMIS system for TANF reduces errors, promotes accuracy in determining TANF related child care eligibility, and reduces redundant verification efforts for mutual clientele.* *Coordination with the TANF Program via automated interfaces also maximizes TANF child care utilization for eligible families, and may reduce welfare recidivism by ensuring that employed former TANF recipients can receive child care services without being placed on the Waiting List.*

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination

Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
|---|---|---|---|
| ☒ | Indian Tribes/Tribal Organizations **(required)**

☐ N/A: No such entities exist within the boundaries of the State | *The Inter Tribal Council of Arizona (ITCA) is represented on the DES Child Care Advisory Committee. The purpose of the ITCA is to provide their 21 member tribes with the means for action on matters that affect them collectively and individually, to promote tribal sovereignty and to strengthen tribal governments.*

DES also meets as needed with individual representatives of Tribal CCDF, Tribal TANF and Tribal employment programs in order to discuss child care issues and needs. | *In addition to having tribal representation on the CCAC, DES participates in and funds the Tribal Early Childhood Working Group that has been established and is facilitated by ITCA. This group's membership includes representatives from Indian Nations and reservations in Arizona, who are directly involved in the administration and development of early childhood development and child care programs. The group has adopted a set of guidelines identifying the improvement of coordination and quality child care as two of its goals. DES uses this forum to communicate with Tribal child care and CCDF grantees to discuss issues and needs, provide technical assistance as requested and to explore and coordinate possible mechanisms that would enhance service delivery as described in both State and Tribal CCDF Plans.* |
| **For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery** | | | |
| ☒ | State/Territory agency with the Head Start Collaboration grant | *See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.* | *See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.* |
| ☐ | State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC)

☒ N/A: State/Territory does not participate in RTT-ELC | | |

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
☒	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	*Representatives from the Arizona Department of Education, which administers the CACFP, participate in the Child Care Advisory Committee. In addition, CACFP staff also meets and communicates with staff from the DES Child Care Administration on a regular basis.*	*Coordination results in the sharing of information regarding child care providers that are involved with both the CACFP and DES and ensuring that family child care homes certified by DES participate in the CACFP.*
☒	State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	*In Arizona, in addition to being the Lead agency for the CCDF, DES is the lead agency for the Part C program (Arizona Early Intervention Program-AzEIP). The AzEIP is a statewide system of supports and services for families of infants and toddlers, birth to three years of age, with disabilities or delays.* *The Arizona Department of Education (ADE) administers the Section 619 grants. ADE is represented on the DES Child Care Advisory Committee.*	*The purpose of early intervention is to help families' help their children develop to their full potential. The DES Child Care Administration communicates regularly with AzEIP to improve services and service coordination for infants, toddlers and their families.* *IDEA Preschool Services (Part B Section 619) are designated to provide Free Appropriate Public Education for all eligible children, ages 3 to 5 with disabilities within an inclusive environment.*
☒	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*
☒	State/Territory agency responsible for child welfare	*In Arizona, in addition to being the Lead agency for the CCDF, DES is the lead agency responsible for administration of the child welfare programs through the Division of Children, Youth & Families (DCYF) which oversees various programs*	*CCA and DCYF work on issues such as developing and implementing referral processes to insure that families referred for services have timely and accurate child care authorizations. Another example would be a mutual effort*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		including child protective services, foster care and, adoptions. The Child Care Administration (CCA) communicates and works closely with DCYF on a regular basis.	*that brings together representatives of DCYF and members of the Child Care Advisory Committee to work on improved communications and understanding of issues that affect individual child care providers that have children in care who are involved in the child welfare system.*
☒	State/Territory liaison for military child care programs or other military child care representatives	*DES communicates and coordinates with military child care programs on an as needed case-by-case basis. This may occur at the local level at which the military program is geographically situated.*	*Working with military child care representatives has resulted in DES eligible families being able to use family child care homes approved by military child care programs.*
☒	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	*Through an Interagency Services Agreement, DES provides funds to the Governor's Office of Children, Youth & Families (GOCYF) that are used to contract with and support the Arizona Center for Afterschool Excellence (AzCASE) which participates in the Mott Statewide After-School Network. In addition to coordinating with the GOCYF regarding this contract, the AzCASE is a member of and participates in the DES Child Care Advisory Committee.*	*AZCASE provides leadership and focus for promoting out-of-school time programs in Arizona. Through a network of diverse stakeholders for children, youth and families the Center is creating a single, unifying voice for after-school programs in Arizona to address a focused agenda that include high-profile policy development, partnership linkages, professional development, and enhanced funding for the field of out-of-school time. AZCASE aims to improve access to quality out-of-school learning opportunities for all Arizona children and youth through professional development, advocacy, and community capacity building.*
☒	Local community organizations (child care resource and referral, Red Cross)	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
☒	Provider groups, associations or labor organizations	*Both the Arizona Child Care Association, which represents private, licensed child care centers statewide and the Arizona Family Childcare Association, participate in the DES Child Care Advisory Committee.*	*In addition to their participation in the Child Care Advisory Committee, both of these organizations communicate with the CCA on a regular basis to share ideas, concerns and expertise on issues and matters that impact the delivery of child care services provided in the state.*
☒	Parent groups or organizations	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*	*See discussion of the DES Child Care Advisory Committee provided in the response to "Representatives of general purpose local government" above.*
☒	Other	*Local CCA management staff is involved in activities and efforts throughout the state. This includes working with local groups such as: the Early Care Partnerships of Northern and Southern Pima County; the KARE Family Center in Pima County; City of Tucson; One Stop Offices; United Way groups; West Valley Human Services Alliance, which includes the cities of Peoria, Surprise, Glendale, Avondale and Buckeye as well as community organizations such as WIC, Arizonans for the Protection of Exploited Children, Arizona Bridge to Recovery; United Methodist Outreach Ministries and the Maricopa Association of Governments.* *The Arizona Department of Economic Security, Child Care Administration also participates in a data sharing committee. This committee is made up of representatives from Arizona Department of Education, Arizona*	*Results of these coordination efforts include: better coordination of service delivery, development of collaborative initiatives and sharing of information on child care issues and needs; improvement of services provided to grandparents; implementing child care assistance for One Stop customers entering employment training; and, collaboration focusing on all aspects of Child Care, including provision, literacy, health and advocacy.* *The Committee's work is directed toward achieving a greater degree of consumer protection, and improved quality of child care services through interagency communication, coordination and consistency.*

Agency/Entity (check all that apply)		Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.
		Department of Economic Security, Arizona Board of Early Childhood Development and Health (First Things First) and Arizona Department of Health Services.	

1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

☒ Yes. If yes,
   a) Provide the name of the entity responsible for the coordination plan(s): The Arizona Early Childhood Development and Health Board (First Things First)
   b) Describe the age groups addressed by the plan(s): Birth to age six
   c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):
      ☒ Yes
      ☐ No
   d) Provide a web address for the plan(s), if available: www.azftf.gov/documents/School_Readiness_Indicators.pdf

☐ No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs?

(658D(b)(1)(D), §98.14(a)(1))
Check which entity(ies), if any, the State/Territory has chosen to designate.

☐ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.
   If yes, describe entity, age groups and the role of the Lead Agency _____

☒ State Advisory Council (as described under the Head Start Act of 2007).
   If yes, describe entity, age groups and the role of the Lead Agency
   The Arizona Early Childhood Development and Health (First Things First) Board acts as the State Advisory Council in Arizona and focuses

on children birth to five. The Director of the Arizona Department of Economic Security sits on the Board as an Ex-Officio member.
☐ Local Coordination/Council
   If yes, describe entity, age groups and the role of the Lead
   Agency _____
☐ Other.
   Describe _____
☐None

1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

☒ Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership

Whenever possible, DES will administer the child care program in a manner that will improve the availability, affordability and quality of child care and actively promote public/private partnerships. DES intends to maintain such efforts, and to continue to support and encourage public/private collaborations at a state, regional and local level.

The following information describes examples of ongoing or planned partnerships in Arizona and their impact on meeting child care needs:

The Arizona Early Childhood Comprehensive Systems Initiative of the State Maternal and Child Health Early Childhood Comprehensive Systems (SECCS) Implementation Grant Program, led by the First Things First Board:

This project is being accomplished through the development of an integrated early childhood education system that provides children and families with access to a medical home; information and support for positive social emotional development and, as needed, appropriate behavioral health services; high quality, developmentally appropriate early care and education; parent education, and family support services.

Groups and organizations that have collaborated in this effort or have benefited from the program include: Arizona Chapter of the American Academy of Pediatrics; Arizona Child Care Association; Arizona Child Care Resource and Referral agencies; Arizona Department of Health Service's Division of Behavioral Health, Office of Women's and Children's Health, and Bureau for Child Care Licensure; Arizona Department of Economic Security's Child Care Administration, Child Protective Services and TANF programs; Arizona Health Care Cost Containment System and KidsCare (Arizona's Titles XIX and XXI programs); Chase Emergent Leaders program participants; Children's Action Alliance; Child Care Health Consultants; child care centers; community colleges; county public health departments; Harris Institute for Infant/Toddler Mental Health; Head Start programs, Tribal Head Start programs and the State Head Start Collaboration Office; Parent

Leaders of the Community Development Initiative; Protecting Arizona's Family Coalition; Southwest Human Development; United Way of Tucson and Southern Arizona; University of Arizona Cooperative Extension; Valley of the Sun United Way; and the Virginia G. Piper Charitable Trust.

BUILD Arizona
BUILD is a national initiative created in 2002 by the Early Childhood Funders Collaborative (ECFC), a consortium of private foundations. Recognizing that current programs, policies and services for children and their families often operated in isolation, the ECFC created BUILD to garner private support to stimulate public investment and to help states in constructing a comprehensive early childhood "system of systems" that crosses policy domains and helps ensure children and families get the supports they need. BUILD serves as a catalyst for change and a national resource on early childhood development and policy. BUILD states are leaders in a national movement to innovate effective, comprehensive services to children and families. Current BUILD states include: Illinois, Michigan, Minnesota, New Jersey, New York, Pennsylvania, Ohio, Washington and Arizona.

BUILD Arizona is supported by a group of Arizona funders including **Helios Education Foundation, Virginia G. Piper Trust, Steele Foundation and Valley of the Sun United Way**. Through BUILD Arizona's affiliation with the national BUILD initiative, the Arizona coalition receives expert technical assistance from a BUILD national consultant (planning, policy analysis, best practices research, etc.), statewide coordination and convening support, state to state peer learning opportunities, and access to cutting edge research and best practices in the field.

The national BUILD initiative has also assigned BUILD AZ a state evaluation consultant to monitor and report on coalition progress on an ongoing basis. Support from the national BUILD initiative provides an opportunity for BUILD AZ to learn from other states' experiences.

Public organizations and agencies are included in the system building effort: DES, DHS, FTF, ADE and non-profits such as United Ways contribute staff time and in-kind resources.

The DES routinely encourages public/private partnerships when contracting for services.

Each Request for Proposal (RFP) solicitation requires the potential bidders to describe how public/private partnerships will be developed, promoted and nurtured. RFP responses that demonstrate past success and/or innovative plans to develop public/private partnerships are more likely to be considered for an award. After contract award, service providers are asked to report on the success of their efforts. Examples of success in developing public/private partnerships are found in various contracts that deliver occupational/vocational training to Arizona's child care providers. Businesses that find the training and technical assistance to be beneficial to the community provide facilities to host the training for free or at a reduced cost.

Some trainings offer "door prizes" to participants that are donated by private businesses. Printing companies have offered discounts on the printing and workbooks used in trainings.

☐   No.

1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-01) located on the Office of Child Care website.

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

☐ **Planning**. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.

☐ **Developed.** A plan has been developed as of [**insert date**] and put into operation as of [**insert date**], if available. Provide a web address for this plan, if available: _____

☒ **Other. Describe:**

DES has developed and implemented a Continuity of Operations Plan for continuing essential services (i.e., contracting for child care providers; paying providers; receiving referrals for service from TANF and Child Protective Services; and determining eligibility for families) during and after an emergency event.

This plan details the steps necessary to resume business operations in the event of an emergency and how essential services will be maintained until a full resumption occurs.

All new contracts that DES approves have a provision that requires the contractor to develop a plan to address emergency situations such as pandemics. Each contractor must show: key succession and performance planning if there is a sudden, significant decrease in contractor's workforce; alternative methods to ensure there are services or products in the supply chain; and an up to date list of company contacts and an organizational chart.

Additionally, DES participates in tabletop, functional, and full-scale exercises with other state agencies and counties. During these exercises, the DES is participating

in the mass care at the State Emergency Operations Center. The DES coordinates any resources necessary for critical business functions.

DES also coordinates with other State, County, and emergency management agencies, as well as key community partners, with regard to care of children in emergency preparedness, response, and recovery. Annual full-scale exercises held at the Palo Verde Nuclear Generating Station include hands-on simulations of caring for children at the Reception and Care Center in disaster situations. In addition, the Red Cross is in the process of implementing new federal policies incorporating the sheltering of children within general population shelters.

Although in Arizona, there is not a regulatory requirement for child care providers, the Arizona Department of Health Services has developed an Emergency Preparedness checklist for licensed child care providers. The web address for this checklist is:
http://www.azdhs.gov/als/childcare/documents/providers/forms/emergency_prepared ness.pdf

1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.
Check which elements, if any, the Lead Agency includes in the plan.

☐ Planning for continuation of services to CCDF families
☐ Coordination with other State/Territory agencies and key partners
☐ Emergency preparedness regulatory requirements for child care providers
☐ Provision of temporary child care services after a disaster
☐ Restoring or rebuilding child care facilities and infrastructure after a
   disaster
☒ None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

2.1. Administration of the Program

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), §98.11(a))

2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?
Identify the level at which the following CCDF program rules and policies are established.

- ☒ Eligibility rules and policies (e.g., income limits) are set by the:
    - ☒ State/Territory
    - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set_____
    - ☐ Other. Describe: _____
- ☒ Sliding fee scale is set by the:
    - ☒ State/Territory
    - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set_____
    - ☐ Other. Describe: _____
- ☒ Payment rates are set by the:
    - ☒ State/Territory
    - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set_____
    - ☐ Other. Describe: _____

2.1.2. How is the CCDF program operated in your State/Territory?
In the table below, identify which agency(ies) performs these CCDF services and activities.

Implementation of CCDF Services/Activities	Agency (Check all that apply)
Who determines eligibility?	☒ CCDF Lead Agency ☐ TANF agency ☐ Other State/Territory agency. Describe. _____

Implementation of CCDF Services/Activities	Agency (Check all that apply)
Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____	☐ Local government agencies such as county welfare or social services departments ☐ Child care resource and referral agencies ☐ Community-based organizations ☐ Other. Describe. _____
Who assists parents in locating child care (consumer education)?	☒ CCDF Lead Agency ☐ TANF agency ☐ Other State/Territory agency. Describe. _____ ☐ Local government agencies such as county welfare or social services departments ☒ Child care resource and referral agencies ☐ Community-based organizations ☐ Other. Describe. _____
Who issues payments?	☒ CCDF Lead Agency ☐ TANF agency ☐ Other State/Territory agency. Describe. _____ ☐ Local government agencies such as county welfare or social services departments ☐ Child care resource and referral agencies ☐ Community-based organizations ☐ Other. Describe. _____
Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)	*Payment is issued to the provider either through direct deposit into a banking account specified by the provider or through a warrant that is mailed to the provider.*
Other. List and describe: _____	

2.2. Family Outreach 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 services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))
 Check all agencies and strategies that will be used in your State/Territory.

☒ CCDF Lead Agency
☒ TANF offices
☒ Other government offices
☒ Child care resource and referral agencies
☒ Contractors
☒ Community-based organizations
☒ Public schools
☒ Internet (provide website): www.azdes.gov/childcare/
☒ Promotional materials

☒ Community outreach meetings, workshops or other in-person meetings
☐ Radio and/or television
☐ Print media
☐ Other. Describe: _____

2.2.2. How can parents apply for CCDF services?
Check all application methods that your State/Territory has chosen to implement.

☒ In person interview or orientation
☒ By mail
☒ By Phone/Fax
☐ Through the Internet (provide website) _____
☐ By Email
☐ Through a State/Territory Agency
☐ Through an organization contracted by the State/Territory
☐ Other. Describe: _____

2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices. about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

The State of Arizona ensures that parents are informed about their ability to choose from family and group home care, center-based care and in-home care (including faith-based providers) through a variety of strategies, as outlined below. Faith-based providers are not a specific provider type but may exist within various provider types, and are therefore not referred to as a distinct and separate category of care.

Utilization of brochures for consumer education regarding provider options: The *DES Child Care Programs* brochure is made available at every local child care office and various community agencies for anyone expressing an interest in receiving Child Care Assistance. The brochure lists the types of child care providers that contract with the Department of Economic Security - Child Care Administration and also provides information about assistance with locating a child care provider through Child Care Resource and Referral (CCR&R). The toll free phone number and website for CCR&R are listed in the brochure for easy reference by customers.

The CCR&R also distributes their own individual brochures to local child care offices and community agencies. The CCR&R brochure contains information on choosing quality child care, the types of child care available, and information on how to contact CCR&R for assistance with provider location.

Interview policy requires dialogue regarding provider options: Reinforced in training and by management oversight, DES Child Care Administration policy requires that Child Care Case Managers provide information to the client at initial interview to enable them to make an informed choice of child care arrangements. The following child care options must be discussed with the client and the discussion documented in the case file:

- Licensed Centers;
- Certified Family Child Care Group Homes;
- Certified In-Home Care Providers;
- Certified Group Homes;
- Relative Providers; and
- Non-reimbursable care (i.e., Head Start, public preschool).

Automated notice inserts describing provider options: Automated decision notices mailed to ongoing clients also include a "DES Child Care Services Information" insert, which contains information on assistance in locating a child care provider, and directing the client to contact CCR&R for additional assistance.

The DES Child Care Administration Website: The DES Child Care Administration website http://www.azdes.gov/childcare/ informs individuals that CCA certifies and contracts with small family child care homes, contracts with Department of Health Services (DHS) licensed child care centers and group homes, and non-certified relative providers to provide child care services for eligible families. The site contains "information for parents" which lists the types of providers who contract with DES. It states that if a parent cannot find a child care provider they can contact their local DES Child Care office or CCR&R for assistance in finding a provider that suits their needs. The website also provides information on what to look for when choosing a provider. Two links also available on the DES CCA website providing access to CCR&R's home page. They are: www.arizonachildcare.org/ and the CCR&R on-line referral system: azchildcare.org/countylist.html.

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.
For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

The DES contracts with community-based organizations and institutions of higher learning for the purpose of providing other quality activity that increase parental choice and improve the quality and availability of child care. These services include:

- Providing resources to assist in meeting the increasing demand for child care in rural and low income urban areas by recruiting and providing orientation and training for family child care providers;
- Providing resources to assist with costs associated with meeting requirements to be a child care home provider;
- Providing support to providers that are pursuing national accreditation through enhanced training/technical assistance, and mini-grants;
- Providing support to providers that are pursuing higher education through the payment of tuition, books and fees for Child Development Associate (CDA) and other Early Childhood Education classes at Community Colleges;
- Providing resources to families that are homeless or victims of domestic violence by supporting on-site licensed child care centers at shelters;
- Providing resources to families by paying an enhanced rate for providers that are nationally accredited; and
- Depending on the availability of funding, DES may engage in additional activities to increase parental choice and improve the quality and availability of child care.

The expected results of these activities are:
- Parents will have increased options when selecting child care;
- Barriers will be removed for providers seeking to improve the level of quality they offer and also for those interested in becoming child care providers;
- More child care providers will pursue higher education or national accreditation which has been shown to increase the quality of care; and
- Families will have greater accessibility to nationally accredited providers.

2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program? Check the strategies implemented by your State/Territory.

☒ Provide access to program office/workers such as:
    ☒ Providing extended office hours
    ☒ Accepting applications at multiple office locations
    ☒ Providing a toll-free number for clients
    ☐ Email/online communication
    ☐ Other. Describe: _____
☒ Using a simplified eligibility determination process such as:
    ☐ Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
    ☐ Developing a single application for multiple programs
    ☐ Developing web-based and/or phone-based application procedures
    ☐ Coordinating eligibility policies across programs. List the program names _____

☒ Streamlining verification procedures, such as linking to other program data systems
☒ Providing information multi-lingually
☒ Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time Up-front job search is allowable for TANF Cash Assistance Grant Diversion for up to 3 months.
(Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).
☐ Other. Describe: _____

☐ Other. Describe: _____
☐ None

2.2.6. Describe the Lead Agency's policies to promote continuity of care for children and stability for families.

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

☒ Provide CCDF assistance during periods of job search. Length of time Gaps of employment coverage for two 30 day periods in each 12 month period; the 30 day periods may be consecutive if needed.
☐ Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)
☐ Synchronize review date across programs. List programs: _____
☐ Longer eligibility re-determination periods (e.g., 1 year). Describe _____
☐ Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe _____
☐ Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe _____
☐ Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment
☐ Individualized case management to help families find and keep stable child care arrangements. Describe _____
☐ Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year
☒ Other. Describe Simplified service authorization policies allow flexibility for working parents whose work schedules fluctuate, eligibility verification can be completed electronically and often without an in-person interview, for example using The Work Number to verify income, paid absence policy helps to maintain a child care "slot" during a child's illness.
☐ None

2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency?
Check the strategies, if any, that your State/Territory has chosen to implement.

☒ 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
☒ Bilingual caseworkers or translators available
☐ Outreach Worker
☐ Other: _____
☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered In many offices, DES has Child Care Case Managers who are bi-lingual and speak Spanish. In certain areas of the state, Case Managers may also work with other agency staff that would provide interpretation for individuals who speak Navajo. Additionally, DES has a contract with Language Line Services. Through this contract, DES is able to utilize certified interpreters that provide interpretation in over 150 languages. All printed materials are available in Spanish as well as English.

2.2.8. How will the Lead Agency overcome language barriers with providers?
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
☒ Bilingual caseworkers or translators available
☐ 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 languages offered In many offices, DES has Child Care Case Managers who are bi-lingual and speak Spanish. In certain areas of the state, Case Managers may also work with other agency staff who would provide interpretation for individuals who speak Navajo. Additionally, DES has a contract with Language Line Services. Through this contract, DES is able to

utilize certified interpreters that provide interpretation in over 150 languages. All printed materials are available in Spanish as well as English.

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))
Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available

https://www.azdes.gov/InternetFiles/InternetProgrammaticForms/pdf/CC-001.pdf

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.

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
☒ Applicant identity	*State issued Driver License or ID card, passport, etc.*
☒ Household composition	*Declared on application, verified if questionable, cross referenced with the FAMIS system for TANF eligibility*
☒ Applicant's relationship to the child	*Declared on application, verified if questionable, cross referenced with the FAMIS system for TANF eligibility; verified for nonparent relatives*
☒ Child's information for determining eligibility (e.g., identity, age, etc.)	*Declared on application, verified if questionable, cross referenced with the FAMIS system for TANF eligibility*
☒ Work, Job Training or Educational Program	*Declared on application, verified via employer's statements, pay stubs, or class schedules, or via "The Work Number" (if the employer is listed)*
☒ Income	*Declared on application, verified via employer's statements, pay stubs, or employer collateral contacts, or via "The Work Number" (if the employer is listed); child support verification obtained via online interface, cross referenced with the FAMIS system for TANF eligibility*
☐ Other. Describe _____	

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

☒ Time limit for making eligibility determinations. Describe length of time As soon as verification is received, but no later than 30 days from the application file date.
☐ Track and monitor the eligibility determination process

☐ Other. Describe _____
☐ None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1. through 2.1.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

☒ Yes. If yes, describe: Families receiving TANF are not required to complete an application or appear for a face-to-face interview. They may request services verbally via the telephone. A family may also be determined eligible on an individual case-by-case basis and referred to a DES Child Care Case Manager by a DES TANF Case Manager or a contracted Jobs Case Manager based on the services needed to support participation in the TANF employment plan.

☐ No.

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

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. 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 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
Arizona Department of Economic Security, Employment Administration, Jobs Program

b) Provide the following definitions established by the TANF agency.
- "appropriate child care": - means child care that is licensed by the Arizona Department of Health Services or certified by the Arizona Department of Economic Security.
- "reasonable distance": - means child care that is available when the total travel time from a TANF participants home, to the child care provider, and to a work activity, is less than 1 hour one way by vehicular transportation; or less than ½ hour one way if the only mode of transportation is walking.

- "unsuitability of informal child care": - means child care that is available through a relative provider, but the recipient declares in writing that the provider is inappropriate based on factors such as, that the relative provider: a) Has a history of child neglect or abuse; b) Is experiencing domestic violence; c) Has a history of serious crime; d) Is a drug abuser; e) Has an emotional, mental or physical condition which prevents the relative from providing safe care; or f) Resides in a home which is unsafe for children.
- "affordable child care arrangements": - means child care that is available when the cost of care is equal to or less than the amount that DES will pay.

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

☒ In writing
☒ Verbally
☐ Other: _____

2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

2.3.1. How does the Lead Agency define the following eligibility terms?

- *residing with* - means to live in the same household of a parent, guardian or other person standing in loco parentis, and who has legal responsibility for the child.
- *in loco parentis* - means an individual who: has legal guardianship or who has initiated the process of legal guardianship; or is a caretaker relative who exercises responsibility for the day-to-day physical care, guidance and support of a child who physically resides with the relative and who is by blood, adoption or marriage a grandparent, great-grandparent, sibling of the whole or half blood, stepbrother, stepsister, aunt, uncle, great-aunt, great-uncle or first cousin.

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from birth weeks to 12 years (may not equal or exceed age 13).

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*), §98.20(a)(1)(ii))

     ☐   Yes, and the upper age is _____(may not equal or exceed age 19) .
     Provide the Lead Agency definition of *physical or mental incapacity* –

     ☒   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), §98.20(a)(1)(ii))

     ☐   Yes, and the upper age is _____(may not equal or exceed age 19)
     ☒   No.

2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define "working" for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

> **Reminder** – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

- *working* – means the performance of duties on a regular basis for wages or monetary compensation. Authorized care includes travel time and up to two 30-day "gaps in employment" periods per year to promote continuity of care and support job searching after job loss.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

☒ Yes. If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? Provide a narrative description below.

> **Reminder** – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

- *attending job training or educational program* – means to be present, at an activity outside of the individual's home, on a regular and acceptable basis, as determined by the trainer or educator.

- *job training and educational program* - means participation in an activity outside of the individual's home, which is a structured program, with a goal of, or in preparation for, employment as follows:

  a. High school or its equivalent or remedial education activities reasonably related to obtaining a high school diploma or its equivalent if the individual engaged in the activity is a teen parent.

  b. The DES Jobs or contracted Jobs vendor approved education/training activities. If an individual is a TANF recipient and is required to participate in the DES Jobs program, child care services for any job training and educational program must be approved by the Jobs or contracted Jobs vendor.

  c. Other education and training activities (listed in i. through iv. below) is allowable if the eligible parent who needs child care is working a monthly average of at least 20 hours per week, the education and training activity is related to an employment goal and the student maintains satisfactory progress and remains in good standing with the educational institution:

    i) Attendance at college or trade/vocational activities.

    ii) Attendance at structured work readiness activities (typically involving structured classes and employment preparation activities).

    iii) Attendance at high school, General Educational Development (G.E.D.) classes, English for Speakers of Other Languages (E.S.O.L.) classes or remedial educational activities.

    iv) Attending lab classes.

☐ No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☒ Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a narrative description below.

Reminder – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.

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

- *protective services* – means: a) A child who needs child care as specified in a DES Child Protective Services (CPS) or foster care case plan and who is referred for child care services by a CPS Case Manager; or b) Special circumstances families who are unable to provide child care for a portion of a twenty-four hour day due to a crisis situation of domestic violence or homelessness, a physical, mental, emotional, or medical condition, or participation in a drug treatment or drug rehabilitation program or court ordered community service.

  However, for the purposes of question b) below, the co-payment and income eligibility requirements may be waived on a case-by-case bases only for those who meet the definition of protective services cited in a) in the preceding paragraph.

☐   No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☒   Yes.
☐   No.

2.3.5. Income Eligibility Criteria

a) How does the Lead Agency define "income" for the purposes of eligibility? Provide the Lead Agency's definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

- *income –*

DEFINITION OF "INCOME" FOR THE PURPOSES OF ELIGIBILITY DETERMINATION

(The following information is excerpted from the DES Child Care Policy Manual)

I. Income Eligibility for Child Care Assistance

Income eligibility for child care assistance is based on the gross monthly income of all family members who are included in Family Size as described below.

II. Family Size
Family size is based on the applicant (primary person) and any other parent or responsible person residing in the same household who are legally responsible to financially support either the applicant, or dependents residing in the same household for whom Child Care Assistance is being requested.

A. Family size shall consist of:
- The applicant for Child Care Assistance;
- The applicant's children (under the age of 18 years);
- Any other parent/responsible person in the household who is legally/financially responsible for either the applicant, or for the children needing care;
- The children of the other parent/responsible person residing in the same household (under the age of 18 years); and
- A tax claimant who claims a member of the eligible family residing in the same household as a dependent on the tax claimant's federal or state income tax return for the current calendar year:

B. Treatment of Temporarily Absent Spouses
Parents/responsible persons who are legally married to the applicant and who are temporarily separated physically but with intentions of remaining a family (e.g. incarceration, military assistance) shall be included in family size if the absent spouse is engaged in an eligible activity for Child Care Assistance purposes.

C. When the Applicant is a Caretaker Nonparent Relative of the Children Needing Care
When the caretaker non-parent relative is requesting Child Care Assistance for other related children only (e.g. nieces/nephews, grandchildren): The caretaker non-parent relative is not counted in the family size, and; the child is a household of one with only the child's income counted.

D. When the Applicant is the Legal Guardian of the Children Needing Care
When the legal guardian is applying for a child in guardianship only: The legal guardian shall not be included in family size; their income shall be excluded and; the child shall be considered as a household of one with only the child's income counted.

E. Unwed Minor Parents who Live with their Parents
When the applicant is an unwed minor parent (is not married, separated, or divorced) who also resides with their own parents, the following guidelines apply:

- If Child Care Assistance is requested for the children of a minor parent who resides with their parents, the Case Manager shall make one family size determination for the family consisting of the minor parent, his/her child, and the other parent/responsible person of the child needing care.

- The parents and siblings of the minor parent shall not be included in family size (however, a portion of the income received by the parents of the minor parent shall be deemed and counted as available to the minor parent, after an amount equivalent to 165% of FPL {for the parents of the minor parent and their children} has been subtracted).

- If however, the parent of the minor parent claims either the minor parent or the minor parent's child as a tax dependent on a federal or state income tax return, the parents and siblings of the minor parent shall be included in family size, and all of the income of received by the parents of the minor parent shall be counted as available to the minor parent.

III. Countable Income

The gross monthly income of a family shall include:

A. Gross earnings received for work including: wages, salary, armed forces pay (Base Pay only: military allotments for food and shelter costs provided to military personnel who live off base are excluded from the income calculation), commissions, tips, overtime, teaching assistance wages, piece-rate payments, and cash bonuses earned, before any deductions(including but not limited to taxes, bonds, pensions, union dues, and garnishments).

B. Net income from non-farm self employment, which includes gross receipts minus business expenses.

Gross receipts include the value of all goods sold and services rendered.

Business expenses include costs of goods and services purchased or produced, rent, heat, light, power, depreciation charges, wages, and salaries paid, business taxes and other expenses incurred in operating the business. The value of salable merchandise consumed by the proprietors of retail stores is
not included as part of net income. Payments on loans or mortgages obtained to increase capital investments in property or equipment are not allowed as deductible expenses.

C. Net income from farm self employment which includes gross receipts minus operating expenses from the operation of a farm by persons as owner, renter, or tenant farmer.

Gross receipts include the value of all products sold, government crop loans, money received from the rental of farm equipment to others and incidental receipts from the sale of wood, sand, gravel, and similar items.

Operating expenses include costs of feed, fertilizer, seed, and other farming supplies, wages paid to farm hands, depreciation charges, cash rent, interest on farm mortgages, farm building repairs, farm taxes (not state and federal income taxes), and other expenses incurred in operation of the farm. The value of fuel, food, or other farm products used for family living is not included as part of net income. Payments on loans or mortgages obtained to increase capital investments in property or equipment are not allowed as deductible expenses.

D. Social Security payments prior to deductions for medical insurance including Social Security benefits and "survivors" benefits, and permanent disability insurance payments made by the Social Security Administration.

E. Railroad retirement insurance income.

F. Dividends including interest on savings/checking accounts, stocks, and bonds, membership in association, income and receipts from estates or trusts, net rental income (minus deductions for costs or repairs, utilities paid, maintenance insurance and mortgage payments prorated on a monthly basis), net royalties, receipts from boarders or lodgers (net income received from furnishing room and board shall be one third of the total amount charged). Interest on Series H. United States Government Savings bonds shall be prorated on a monthly basis.

G. Mortgage payments received shall be prorated on a monthly basis.

H. Public assistance payments including payments from the following programs: Cash Assistance, Supplemental Security Income (SSI), State Supplementary Payments (SSP), General Assistance (GA), Bureau of Indian Affairs General Assistance (BIAGA)¸ and Tuberculosis Control (TC).

I. Pensions and annuities including pensions or retirement benefits paid to a retired person or their survivors by a former employer or by a union, or distributions or withdrawals from an individual retirement account. If payments are made in periodic payments from annuities of insurance, the payments shall be prorated on a monthly basis.

J. Unemployment Insurance payments including compensation received from government unemployment insurance agencies or private companies during periods of unemployment, and any strike benefits received from union funds.

K. Worker's compensation payments.

L. Money received from the Domestic Volunteer Act when the adjusted hourly payment is equal to or greater than minimum wage. Action Volunteer Programs include VISTA, Foster Grandparent Program (FGP), Retired Senior Volunteer Program (RSVP), and Senior Companion Program (SCP).

M. Alimony or spousal maintenance which shall be counted the month received.

N. Child support which shall be counted the month received.

O. Veterans' pensions including benefits and disability payments paid periodically by the Veterans Administration to members of the Armed Forces or to a survivor of deceased veterans. Money received shall be prorated on a monthly basis.

P. Cash gifts received on a monthly (or recurring) basis from relatives, other individuals, and private organizations, as a direct payment in the form of money.

Q. Money received through the lottery, sweepstakes, contests, or through gambling ventures whether received on an annuity or lump sum basis.

R. Any other source of income not specifically excluded as outlined in Excluded Income below.

IV. Excluded Income

The gross monthly income for a family shall not include:

A. Per capita payments to or funds held in trust for any individual in satisfaction of a judgment of the Indian Claims Commission or the Court of Claims.

B. Payments made pursuant to the Alaska Native Claims Settlement Act to the extent such payments are exempt from taxation under section 21 (a) of the Act.

C. Money or capital gains received as a lump sum, from the sale of personal or real property, such as stocks, bonds, or a car (unless the person was engaged in the business of selling such property, in which case the net proceeds would be counted as income from self employment).

D. Withdrawals of bank deposits.

E. Loans; money borrowed.

F. Tax refunds.

G. Any monies received through the federal Earned Income Credit (EIC).

H. One time lump sum awards or benefits, including:
   - Inherited funds;
   - Insurance awards;
   - Damages recovered in a civil suit;
   - Monies contributed by a client to a retirement fund that are later withdrawn prior to actual retirement;
   - Retroactive public assistance payments; and
   - Lump sum child support payments intercepted by the Division of Child Support Enforcement (DCSE) from an absent parent's tax refund from the IRS.

I. The value of U.S. Department of Agriculture (USDA) Food Stamps.

J. The value of USDA donated food.

K. The value of any supplemental food assistance received under the Child Nutrition Act of 1966 and special food service program for children under the National School Lunch Act, the Women, Infant, and Children Program (WIC), Child and Adult Care Food Program (C.A.C.F.P.), and the School Lunch Program.

L. Any payment received under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (e.g. Navajo/Hopi Relocation Act).

M. Earnings of a child who is under the age of 18 and attending high school or other training program, and who is not a minor parent who needs Child Care Assistance for his or her own child (the earnings of a minor parent who needs care for his or her own child are countable).

N. Home produce used for household consumption.

O. Government sponsored training program expenses (TRE payments) such as: training related expenses paid to Jobs participants and Job Training Partnership Act (JTPA) training expenses paid directly to the client.

P. Military allotments for food and shelter costs for military personnel who live off base, when the allotment is specifically designated as such (e.g. Basic Allowance for Quarters [BAQ]). Armed forces base pay is countable income.

Q. The value of goods or services received in exchange for work.

R. Interest on Series E United States Government Savings bonds.

S. Foster care maintenance payments received for care of foster children.

T. Adoption subsidy payments received for the care of adopted children.

U. Educational loans, grants, awards, and scholarships regardless of their source, including Pell Grants, Supplemental Educational Opportunity Grants (SEOG), Bureau of Indian Affairs (BIA) Student Assistance Grants, college work study income, Carl D. Perkins Vocational and Applied Technology Education Act income, and any other state or local, public or private educational loans, grants, awards, and scholarships.

V. Money received from the Domestic Volunteer Act when the adjusted hourly payment is less than minimum wage; Action Volunteer Programs include VISTA, Foster Grandparent Program (FGP), Retired Senior Volunteer Program (RSVP) and Senior Companion Program (SCP).

W. Housing and Urban Development (HUD) benefits, cash allowances and credits against rent.

X. Vendor payments including payments made directly to a third party by friends, relatives, charities, or agencies to pay bills for the client.

Y. Vocational Rehabilitation (VR) training related expenses (TRE) which are reimbursements for expenses paid. Subsistence and maintenance allowances, and incentive payments not designated as wages. Intended use shall be verified by the VR counselor.

Z. Disaster relief funds and emergency assistance provided under the Federal Disaster Relief Act, and comparable assistance provided by a State, local government, or disaster assistance organization.

AA. Energy assistance including all state or federal benefits designated as "energy assistance" or assistance from a municipal utility or non-profit agency.

BB. Agent Orange payments.
CC. Reimbursements for job related expenses, which are less than or equal to the actual expense incurred. This includes reimbursements for child care expenses from an employer paid to an employee to the extent that the reimbursement does not exceed the actual child care expenses paid by the employee.

DD. Any other income specifically excluded by applicable state or federal law.

V. Income Deduction

Child support that is paid for dependents who do not reside in the same household with the eligible family shall be deducted from the monthly gross countable income prior to income calculation and fee level and copayment assignment.

VI. Income Calculation

The Child Care Case Manager shall calculate gross monthly income as outlined below.

A. The Case Manager shall include all income of all family members included in the family size determination, other than excluded income (refer to Excluded Income for definitions of excluded income sources).

B. The Case Manager shall calculate a monthly figure for each source of income separately with the appropriate method used for calculation.

C. After calculating monthly income for each source of income, the Case Manager shall add the monthly amounts from each source to obtain the total monthly income.

D. The Case Manager shall convert income received less often than monthly to a monthly figure as indicated below.

- The Case Manager shall prorate the total income over the number of months that the income is intended to cover.
- If the income is received on or after the date of application, a monthly share of income shall be considered beginning with its earliest possible effective date and for a number of months equal to the number of months, which the income covers.
- If the family receives the income prior to the date of application, the number of months that the income is intended to cover shall be equal to the number of months of coverage remaining.

E. The Case Manager shall convert income received more often than monthly, for a period covering less than a month, to a monthly amount by one of the methods listed below.

- If the income amount does not vary and is received monthly, weekly, bi-weekly, or semi-monthly, the conversion to a monthly amount will be obtained by multiplying the pay period amount by: a) 1, if monthly; b) 4.3, if weekly; c) 2.15, if bi-weekly; or d) 2, if semi-monthly.
- This amount shall be applied as income on an ongoing monthly basis until there is a change in the income.

- If the monthly income received varies in amount and frequency, and exact monthly figures are unavailable, the Case Manager shall use an average monthly figure.

F. When a family receives a new income source that will be received monthly, weekly, bi-weekly or semi-monthly: A new fee level or ineligibility shall not be assessed to the client until the monies are available to the client and; the income shall not be considered available to the family until 10 days after the date that the first full payment is received.

VII. Income Deeming Process for Unwed Minor Parents who Live with Their Own Parents

When unwed minor parents reside with their own parents, a portion of the gross monthly income of parents of unwed minor parents shall be deemed as available and considered countable income for the unwed minor parent for the purpose of determining income eligibility. The deeming process shall not be applied when the minor parent does not reside with their own parents, when the minor parent is married, separated, or divorced, or when the parent of the minor parent claims the minor parent or minor parent's child as a tax dependent.

A. When unwed minor parents reside with their own parents, the Child Care Case Manager shall:
- Verify monthly countable earned and unearned income received by the parents of the unwed minor parent;
- Deduct any Child Support paid by the parent of the unwed minor parent from the total countable income; and
- Determine the total number of household dependents for whom the parents of the unwed minor parent have the legal and financial responsibility to support. This number shall include: The parent(s) themselves; and any other children or dependents residing in the same household. This number shall not include the unwed minor parent and their children.

B. The deeming process applies to unwed minor parents only, and shall not be used when the minor parent is married, separated, or divorced.

C. Dependent Deduction Chart
The following worksheet and chart displays how income, that will be deducted from the parents' gross monthly income based on the number of their dependents as described above, is determined. The remaining income shall be deemed as available to the unwed minor parent.

CHILD CARE ASSISTANCE UNWED MINOR PARENT DEEMING WORKSHEET

CASE NAME (Last, First, M.I.)	CLIENT ID	
1. Total Monthly Earned Income received by parent of the unwed minor parent.		$
2. Total Monthly Unearned Income received by parent of the unwed minor parent.		$
3. Subtotal (Add lines 1 and 2)		$
4. Number of dependents _____; Enter amount required to support the other dependents according to the Dependent Deduction Chart below (this number includes the parents of the minor parents, and any of their children and dependents residing in the same household; this number does not include the minor parent or the minor parent's children).		$
5. Child Support payments paid monthly for persons living outside of the home.		$
6. Subtotal (Add lines 4 and 5)		$
7. Total income deemed as available to the unwed minor parent. (Subtract line 6 from line 3)		$
8. Earned income received monthly by the unwed minor parent.		$
9. Unearned Income received monthly by the unwed minor parent.		$
10. Total countable income for the unwed minor parent. (Add lines 7, 8, and 9)		$
11. Enter fee level if the unwed minor parent is eligible for Child Care Assistance		

Dependent Deduction Chart

Number of Dependents (Not including minor parent and the minor parent's child[ren])	Income Deducted From Parents Income To determine Deemed Portion (Effective July 1, 2013)
1	$1,581
2	$2,134
3	$2,687
4	$3,239
5	$3,792
6	$4,345
7	$4,898
8	$5,450
9	$6,003
10	$6,556
11	$6,710
12	

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

☒ Adoption subsidies
☒ Foster care payments
☐ Alimony received or paid
☐ Child support received
☒ Child support paid
☒ Federal nutrition programs
☒ Federal tax credits
☒ State/Territory tax credits
☒ Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
☐ Medical expenses or health insurance related expenses
☒ Military housing or other allotment/bonuses
☒ Scholarships, education loans, grants, income from work study
☐ Social Security Income
☐ Supplemental Security Income (SSI)
☐ Veteran's benefits
☐ Unemployment Insurance
☐ Temporary Assistance for Needy Families (TANF)
☐ Worker Compensation
☒ Other types of income not listed above See response at 2.3.5. a)
☐ None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

☐ Children under age 18
☐ Children age 18 and over – still attending school
☐ Teen parents
☒ Unrelated members of household
☐ All members of household except for parents/legal guardians
☒ Other

Earnings of a child under the age of 18 and attending high school or other training program, (and who is not a minor parent who needs child care assistance for his or her own child) are excluded. The earnings of a minor parent who needs care for his or her own child are countable.

Earned and unearned income received by a caretaker relative who is applying for a related child (e.g., grandchild, niece, nephew, etc.) are excluded; income received for the support of the *related child is counted (e.g., TANF Cash Assistance, child support, Social Security benefits.*

☐ None

d) 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 SMI.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) $/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	2,793	2,375	1,581	56.61
2	3,652	3,105	2,134	58.4
3	4,511	3,835	2,687	59.6
4	5,369	4,565	3,239	60.3
5	6,229	5,295	3,792	60.9

Reminder - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2013 poverty guidelines are available at http://aspe.hhs.gov/poverty/13poverty.cfm

e) Will the Lead Agency have "tiered eligibility" (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

    ☐ Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe** _____.
      Note: This information can be included in a separate table, or by placing a "/" between the entry and exit levels in the above table.
    ☒ No.

f) SMI Year FFY 2014 and   SMI Source Federal Register/78 FR 28597, No. 2013-11575, 5/15/13, pp. 28597-28599

g) These eligibility limits in column (c) became or will become effective on: October 1, 2013

2.3.6. Eligibility Re-determination

a) Does the State/Territory follow OCC's 12 month re-determination recommendation? (See Program Instruction on Continuity of Care)
    ☐ Yes
    ☒ No. If no, what is the re-determination period in place for most families?

      ☒ 6 months

☐ 24 months
☐ Other. Describe _____
☐ Length of eligibility varies by county or other jurisdiction. Describe _____

b) Does the Lead Agency coordinate or align re-determination periods with other programs?

☒ Yes. If yes, check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.
☐ Head Start and/or Early Head Start Programs. Re-determination period _____
☐ Pre-kindergarten programs. Re-determination period _____
☐ TANF. Re-determination period _____
☐ SNAP. Re-determination period
☐ Medicaid. Re-determination period
☐ SCHIP. Re-determination period
☒ Other. Describe Generally, authorizations are created for six month periods. For TANF participants in the Jobs Program, however, the authorization is tailored to the TANF employment plan, and can be less than six months if needed.
☐ No.

c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.

Families are required to report changes in their need for child care, their employment, their household income, when someone moves into or out of their home, and changes in their selected child care providers within two days of those changes.

d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination

The changes could result in an increase or decrease in the number of days the family can use each month, an increase or decrease in the family's copayments required, a re-allotment of the days available to the family for their new provider selection(s), or closure of the child care case if the family no longer meets eligibility criteria.

e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples).

The number of days that child care is needed and the copayments that the family is assigned is tailored based upon the families circumstances at a

given time. Families who experience a change in that need can have their level of child care adjusted to ensure that they continue to have enough child care to cover their needs as they change. Allowing families to change child care provider selections mid-month ensures that the family has the most flexibility with their provider choices. Eligibility verification can be completed electronically and often without an in-person interview. A paid absence policy helps to maintain a child care "slot" during a child's illness.

f) Does the Lead Agency use a simplified process at re-determination?

⊠ Yes. If yes, describe
The review process is automated. Review packets, including the application are mailed to families due for review. An interview is not required; necessary communication is conducted via phone, U.S. mail, email and fax. Verification of eligibility factors is performed via systems and on-line data matches to the greatest extent possible.
☐ No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select **ONE** of these options.

☐ Lead Agency currently does not have a waiting list and:
　☐ All eligible families *who apply* will be served under State/Territory eligibility rules
　☐ Not all eligible families *who apply* will be served under State/Territory eligibility rules
⊠ Lead Agency has an active waiting list for:
　☐ Any eligible family who applies when they cannot be served at the time of application
　⊠ Only certain eligible families. Describe those families:
　All new applicants are placed on the waiting list with the exception of: TANF recipients who need child care for employment or Jobs program participation, former TANF recipients who are eligible for Transitional Child Care and, CPS referred families.
☐ Waiting lists are a county/local decision. Describe _____
☐ Other. Describe _____

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations
Families are advised (on each decision notice) that they may appeal an eligibility decision or action denying, terminating or reducing benefits by submitting a written request for appeal to the DES Child Care Administration within 10 days following the notice generation date. Families have the option

of continuing benefits pending an appeal decision; however, they are responsible for the ensuing overpayment if the appeal decision is not in their favor.

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on <u>income and the size of the family</u> to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.
Will the attached sliding fee scale be used in <u>all</u> parts of the State/Territory?
☒ Yes. Effective Date 7/1/13
☐ No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B))
Check only one option.

☐ State Median Income, Year: _____
☒ Federal Poverty Level, Year: 2013
☐ Income source and year varies by geographic region. Describe income source and year: _____
☐ Other. Describe income source and year:_____

2.4.3. How will the family's contribution be calculated and to whom will it be applied?
Check all that the Lead Agency has chosen to use. (§98.42(b))

☒ 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
☐ 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
   ☐ No additional percentage applied charged after certain number of children
   ☐ Fee is per family
☐ Contribution schedule varies by geographic area. Describe: _____
☐ Other. Describe _____

If the Lead Agency checked more than one of the options above, describe

For families eligible for Transitional Child Care (TCC), the fee is a dollar amount with the fee being the same for each child, however there is no additional co-payment charged beyond the third child.

2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

☐ Yes, and describe those additional factors:
☒ No.

2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)).
Select **ONE** of these options.

Reminder – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of "protective services" (as defined in 2.3.4.a).

☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
☐ NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: $_____
☒ SOME families with income <u>at or below the poverty level</u> for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families: Families who have an open TANF case and whose income is at or below the poverty level will not have a required co-payment.

2.5. Prioritizing Services for Eligible 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. 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), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes.* Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs.*

How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
Children with special needs **Provide the Lead Agency definition of** *Children with Special Needs* - means children who need increased supervision, modified equipment, modified activities, or modified facility within a child care setting due to any physical, mental, sensory, or emotional delay, or medical condition, and includes a child with a disability.	☐ Priority over other CCDF-eligible families ☒ Same priority as other CCDF-eligible families ☐ Guaranteed subsidy eligibility ☐ Other. Describe _____	☐ Yes. The time limit is: _____ ☒ No	☐ Different eligibility thresholds. Describe _____ ☒ Higher rates for providers caring for children with special needs requiring additional care ☐ Prioritizes quality funds for providers serving these children ☐ Other. Describe _____
Children in families with very low incomes **Provide the Lead Agency definition of** *Children in Families with Very Low Incomes* - means an income at or below 100 percent of the Federal Poverty Level, as determined by the DES Child Care Administration.	☒ Priority over other CCDF-eligible families ☐ Same priority as other CCDF-eligible families ☐ Guaranteed subsidy eligibility ☐ Other. Describe _____	☐ Yes. The time limit is: _____ ☒ No	☐ Different eligibility thresholds. Describe _____ ☐ Waiving co-payments for families with incomes at or below the Federal Poverty Level ☒ Other. Describe n/a

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of 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?
(658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Reminder - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance 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.

☒ Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
☒ Waive fees (co-payments) for some or all TANF families who are below poverty level
☒ Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
☐ Other: _____

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b))
Reminder – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

Term(s)	Definition(s)
Transitional Child Care (TCC)	- means child care assistance offered to families who: a) have received TANF within six months of application for child care services; b) apply for services within six months of TANF case closure; c) are in need of child care because they are working; and d) have income that does not exceed the income level used to limit eligibility as defined in the table at Section 2.3.5. Eligibility for TCC may continue for up to 24 months following TANF case closure. TCC families are not subject to the waiting list.
Jobs Program	- means an administrative unit within DES, which is responsible for the administration of a program, which assists TANF recipients to prepare for, obtain, and retain employment; or any other entity that contracts with DES to perform the function(s) stated above. DES may also provide services (under this definition) to TANF recipients to enable them to participate in an activity required and approved by a Tribal employment program as a condition of receipt of TANF benefits. Jobs participants are not subject to the waiting list.
Low income (and at risk of	- means a family eligible for child care services

Term(s)	Definition(s)
becoming dependent on TANF)	with income between 101 percent and 165 percent of the Federal Poverty Level, as determined by the DES Child Care Administration.

2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives 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), §98.15(a)).

2.6.1. Child Care Certificates

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

☐ Before parent has selected a provider
☒ After parent has selected a provider
☐ Other. Describe _____

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))
☐ Certificate form provides information about choice of providers
☐ Certificate is not linked to a specific provider so parents can choose provider of choice
☒ Consumer education materials (flyers, forms, brochures)
☒ Referral to child care resource and referral agencies
☒ Verbal communication at the time of application
☐ Public Services Announcement
☒ Agency Website: www.azchildcare.org
☐ Community outreach meetings, workshops, other in person activities
☐ Multiple points of communication throughout the eligibility and renew process
☐ Other. Describe _____

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

☒ Authorized provider(s)
☐ Authorized payment rate(s)
☒ Authorized hours
☒ Co-payment amount

☒ Authorization period
☐ Other. Describe _____

d) What is the estimated proportion of services that will be available for child care services through certificates? 100 percent

2.6.2. 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), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **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 process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: _____
☒ No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

☐ Increase the supply of specific types of care
  ☐ Programs to serve children with special needs
  ☐ Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
  ☐ Programs to serve infant/toddler
  ☐ School-age programs
  ☐ Center-based providers
  ☐ Family child care providers
  ☐ Group-home providers
  ☐ Programs that serve specific geographic areas
    ☐ Urban
    ☐ Rural
  ☐ Other. Describe _____
☐ Support programs in providing higher quality services
☐ Support programs in providing comprehensive services
☐ Serve underserved families. Specify: _____
☐ Other. Describe _____

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

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

d) How are payment rates for child care services provided through grants/contracts determined? _____

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts? _____

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31))
Check the strategies that will be implemented by your State/Territory.

☐ Signed declaration
☐ Parent Application
☐ Parent Orientation
☐ Provider Agreement
☐ Provider Orientation
☒ Other. Describe: All child care providers must have a Registration Agreement with DES in order to facilitate payment to that provider. By signing the Registration Agreement, the provider agrees to allow access by parents, guardians, or their authorized representatives to all areas of the facility where child care is provided at any time during the provider's hours of operation and whenever the children are in the care of the provider. Additionally, in the state statute and rule governing the health and safety of child care centers and group homes, the Arizona Department of Health Services (DHS), requires facilities to allow parents, guardians or authorized representatives to have immediate access.

2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv))
Will the Lead Agency limit the use of in-home care in any way?

☐ No
☒ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.
    ☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
    ☒ Restricted based on provider meeting a minimum age requirement
    ☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)
    ☐ Restricted to care by relatives
    ☐ Restricted to care for children with special needs or medical condition
    ☒ Restricted to in-home providers that meet some basic health and safety requirements
    ☐ Other. Describe _____

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

By law, the Arizona Department of Health Services (DHS) is responsible for the licensure of child care centers and certification of child care group homes. This includes maintaining a record of substantiated complaints, which are available for public review upon request. Members of the public may review child care center and group home licensing/certification files in DHS Offices of Child Care Licensing at various locations around the state. The public may also contact a DHS Office of Child Care Licensure and request that complaint information be provided by mail or by fax. Additionally, formal enforcement actions taken by DHS may be reviewed at the webpage of the DHS Division of Licensing Services Office of Child Care Licensing: http://hsapps.azdhs.gov/ls/sod/SearchProv.aspx?type=CC.

Complaint records for small certified family child care, in-home and relative providers are maintained and available for review in various DES Child Care Administration offices throughout the state. The public may also contact a DES Child Care Administration office and request that complaint information be provided verbally, by mail or by fax.

Complaint information on small family child care homes which are registered with the Child Care Resource & Referral (CCR&R) service are available for review at various offices of the community based agencies that provide CCR&R under contract with DES. These homes are not regulated or monitored and complaints on CCR&R registered homes are not investigated. The publicly viewable files contain both complaints and the provider's written responses, if any, to the complaints.

2.7. Payment Rates for Child Care Services

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

2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.
Will the attached payment rates be used in all parts of the State/Territory?

☑ Yes. Effective Date: April 2009
☐ No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

☑ Policy on length of time for making payments. Describe length of time
Per state statute and as cited in the child care subsidy contract, DES has 30 days to issue payment (after the receipt of correctly completed billing information).
☑ Track and monitor the payment process

☒ Other. Describe Use of electronic submission of billing information and direct deposit for payment.
☐ None

2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011).). The MRS must be completed prior to the submission of the CCDF Plan (see Program Instruction CCDF-ACF-PI-2009-02 for more information on the MRS deadline).

    a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): 06/2012.
    b) Provide a **summary of the results** of the survey.
    The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

INTRODUCTION:
The Arizona Department of Economic Security (DES) was previously required, as a condition of the Federal Family Support Act of 1988, to determine market rates for child care every two years. The federal regulations for the Family Support Act stated that "...local market rates must be determined: For all political subdivisions or for alternative areas which represent reasonable local child care markets based upon their geographic proximity or common characteristics." Additionally, these rates "must be updated periodically, but no less than biennially."

These regulations further mandated that market rates be determined for different types of care (i.e., center, group home care, family home care, etc.). Furthermore, market rates must also differentiate (where applicable) among care for infants, toddlers, preschool and school age children, whether care is full or part time, and consider reductions in the cost of care for additional children in the same family.

Child care programs that were funded under the Family Support Act included Jobs Opportunity and Basic Skills (JOBS) child care, Aid to Families with Dependent Children (AFDC) related child care, Transitional Child Care (TCC) and Title IV-A At-Risk Child Care. An additional federal child care program, the Child Care and Development Block Grant (CCDBG) was established in 1990 and regulations for this program required many of the same factors to be considered when establishing a payment rate structure for child care benefits provided through the CCDBG.

In 1996 federal welfare reform legislation, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), was passed and greatly changed the nature of funding for child care programs that were federally funded. Programs that were authorized and funded under the Family Support Act were repealed. However, PRWORA provided new Federal child care funds and transferred them to an amended CCDBG. The U.S. Department of Health and Human Services (DHHS)

named these new combined funds the Child Care and Development Fund (CCDF) to reflect the integration of the multiple funding sources.

In July of 1998, DHHS issued final regulations (45 CFR Parts 98 and 99) for the CCDF. These regulations continued the requirement for states to conduct a child care market rate survey every two years. States must also show how their current reimbursement rates relate to market rates. The regulations also require this information be determined by a recent market rate survey and be included in a federally mandated CCDF Plan. Arizona's next CCDF Plan will become effective October 1, 2013. Information from this, Arizona's Twelfth Child Care Market Rate Survey, will be included as a component of that Plan.

METHODOLOGY:
Federal CCDF regulations require that states develop a State Plan, which is to be submitted to the Secretary of the DHHS. The Plan shall contain a biennial local market rate survey. The preamble to the regulations indicates DHHS believes that surveys will show variations in rates among categories of child care and will also reflect sub-state variations in rates, which States must consider.

DES has designated six such sub-state areas, or districts. Each district represents a county or group of counties. The Department utilizes these districts for planning, service delivery and in conducting its field operations. Each district is an area with unique needs based upon geographic proximity or other common characteristics. They are also similar to those used by the Arizona Council of Governments. The following counties define these districts:

District I   -   Maricopa
District II   -   Pima
District III   -   Apache, Coconino, Navajo & Yavapai
District IV   -   La Paz, Mohave & Yuma
District V   -   Gila & Pinal
District VI   -   Cochise, Graham, Greenlee & Santa Cruz

DES contracted with the Maricopa County Office of Research and Reporting to conduct the Child Care Market Rate Survey. The Maricopa County Office of Research and Reporting is an independent credentialed organization with strong survey research skills. They are recognized by the American Association of Public Opinion Researchers and are also a member of the National Field Director's Association, which is a scientific data collection forum with members such as the U.S. Census Bureau, National Institute of Health and many major universities.

Due to the complexity of the survey, to help ensure that the most accurate data was obtained and to attain a high response rate a telephone survey methodology was used. Interviewers read a questionnaire and responses were entered into a data base. This method of surveying allowed for the collection of necessary data as reported by providers and corresponded with the need to gather complex rate

information by age categories and by category of care. The Maricopa County Office of Research and Reporting conducted the market rate survey in both English and Spanish.

Consistent with past surveys, all identifiable providers were surveyed rather than selecting a random sample. The basis for this approach is because a complete census is more reliable than a sample as there is no chance of a sampling error. Additionally, in some areas of the state, obtaining a sufficiently large and representative sample is not possible.

Sources of provider names and telephone numbers which were utilized included: 1) The DES database of certified family homes that provide child care services to families eligible for child care assistance; 2) The Department of Health Services' (DHS) database of licensed child care centers (including "preschools" required to be licensed as child day care centers) and certified child care group homes; 3) Listings obtained from non-profit sponsors who approve child care homes to participate in the Arizona Department of Education's (ADE) federal Child and Adult Care Food Program (CACFP); and 4) Lists of otherwise unregulated homes registered with the state contracted Child Care Resource & Referral (CCR&R) agencies.

Initially the various sources identified 5,526 possible child care providers in the state. Providers that were listed on more than one list, not providing care, not charging for their services, or were unable to be interviewed due to invalid and non-existent telephone numbers were eliminated from this total. This resulted in a list of 3,950 childcare providers, of which 99% were interviewed.

A total of 3,930 child care providers (1,787 licensed centers, 1,676 approved family homes, 306 certified group homes and 161 unregulated homes listed with CCR&R) were interviewed for this survey. The survey was conducted between March and June 2012. As with any survey, there is a margin of error due to reasons such as the respondents' interpretations of the questions asked, their understanding of the purpose of the survey and resultant usage of the data compiled.

Prior to the start of the survey, all sources that supplied provider information were notified that they could direct any questions that came to them, regarding the survey, to DES. At the onset of each telephone interview, providers were advised that specific individual information would be kept confidential and would not be used for any purpose other than identifying local market information. Individual providers were given a telephone number, which they could use to call the surveyor back if necessary. They were also provided with a telephone number of a DES contact if they had any other questions.

MAJOR FINDINGS

Licensed Centers

1,787 centers were surveyed. This was a 5% decrease in the number of center providers identified and interviewed compared to the 2010 survey.

Centers reported approval to care for 193,886 children (an 11% decrease from the 2010 survey).

Centers reported providing care for 106,222 children on an average day (a 6% decrease from the 2010 survey).

♦ The median daily charge for full-time care, for a child under the age of one year, ranged from $27.25 to $42.50 across the six DES districts. The statewide median is $41.00 (a 6% increase from the 2010 survey).

♦ The median daily charge for full-time care, for a one or two year old child, ranged from $24.00 to $39.07 across the six DES districts. The statewide median is $36.98 (a 6% increase from the 2010 survey).

♦ The median daily charge for full-time care, for a three, four or five year old child, ranged from $22.00 to $34.00 across the six DES districts. The statewide median is $32.00 (a 7% increase from the 2010 survey).

♦ The median daily charge for full-time care, for a school age child, ranged from $21.00 to $30.00 across the six DES districts. The statewide median is $29.07 (a 7% increase from the 2010 survey).

Of the centers surveyed, 71% reported offering a discount for a second child.

Of the centers surveyed:

⇒ 4% reported providing late night care.
⇒ 3% reported providing all night care.
⇒ 4% reported providing weekend care.
⇒ 6% reported providing extended care.

Approved Family Child Care Homes

Included in this category are DES certified homes and ADE Alternate Approval Homes participating in the Child & Adult Care Food Program. 1,676 homes were surveyed. This was a 20% decrease in the number of approved family child care home providers identified and interviewed compared to the 2010 survey.

Homes surveyed reported approval to care for 8,057 children (a 23% decrease from the 2010 survey).

Homes reported providing care for 6,707 children on an average day (a 19% decrease from the 2010 survey).

♦ The median home charge for full-time care, for a child under the age of one year, ranged from $20.00 to $25.00 across the six DES districts. The statewide median is $22.00 (no change from the 2010 survey).

♦ The median daily charge for full-time care, for a one or two year old child, ranged from $20.00 to $25.00 across the six DES districts. The statewide median is $20.00 (no change from the 2010 survey).

♦ The median daily charge for full-time care, for a three, four or five year old child, ranged from $20.00 to $25.00 across the six DES districts. The statewide median is $20.00 (no change from the 2010 survey).

♦ The median daily charge for full-time care, for a school age child, ranged from $16.00 to $25.00 across the six DES districts. The statewide median is $20.00 (no change from the 2010 survey).

Of the homes surveyed, 55% reported offering a discount for a second child.

Of the homes surveyed:

⟹ 45% reported providing late night care.
⟹ 37% reported providing all night care.
⟹ 52% reported providing weekend care.
⟹ 37% reported providing extended care.

Certified Group Homes

306 certified group homes were surveyed. This was an 18% decrease in the number of certified group homes identified and interviewed compared to the 2010 survey.

Group homes surveyed reported approval to care for 3,003 children (a 19% decrease from the 2010 survey).

Group homes reported providing care for 2,460 children on an average day (a 16% decrease from the 2010 survey).

♦ The median daily charge for full-time care, for a child under the age of one year, ranged from $24.00 to $30.00 across the six DES districts. The statewide median is $26.00 (a 4% increase from the 2010 survey).

♦ The median daily charge for full-time care, for a one or two year old child, ranged from $22.00 to $26.00 across the six DES districts. The statewide median is $25.00 (no change from the 2010 survey).

♦ The median daily charge for full-time care, for a three, four or five year old child, ranged from $22.00 to $26.00 across the six DES districts. The statewide median is $25.00 (no change from the 2010 survey).

♦ The median daily charge for full-time care, for a school age child, ranged from $22.00 to $25.00 across the six DES districts. The statewide median is $25.00 (a 4% increase from the 2010 survey).

Of the group homes surveyed, 60% reported offering a discount for a second child.

Of the group homes surveyed:

⇒ 49% reported providing late night care.
⇒ 42% reported providing all night care.
⇒ 42% reported providing weekend care.
⇒ 40% reported providing extended care.

Unregulated Homes listed with a Child Care Resource & Referral (CCR&R) agency

161 unregulated CCR&R homes were surveyed. This was a 40% decrease in the number of unregulated homes identified and interviewed compared to the 2010 survey.

Unregulated CCR&R homes surveyed reported being able to care for 706 children (a 41% decrease from the 2010 survey).

Unregulated CCR&R homes reported providing care for 512 children on an average day (a 43% decrease over the 2010 survey).

♦ The median daily charge for full-time care, for a child under the age of one year, ranged from $25.00 to $30.00 across the six DES districts. The statewide median is $30.00 (an increase of 11% from the 2010 survey).

♦ The median daily charge for full-time care, for a one or two year old child, ranged from $20.00 to $30.00 across the six DES districts. The statewide median is $30.00 (an increase of 15% from the 2010 survey).

♦ The median daily charge for full-time care, for a three, four or five year old child, ranged from $22.00 to $30.00 across the six DES districts. The statewide median is $30.00 (an increase of 20% from the 2010 survey).

♦ The median daily charge for full-time care, for a school age child, ranged from $22.00 to $30.00 across the six DES districts. The statewide median is $28.00 (an increase of 12% from the 2010 survey).

Of the unregulated R&R homes surveyed, 70% reported offering a discount for a second child.

Of the unregulated R&R homes surveyed:

⇒ 14% reported providing late night care.
⇒ 11% reported providing all night care.
⇒ 11% reported providing weekend care.
⇒ 12% reported providing extended care.

2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75th percentile. These tables allow Lead Agencies to use a common metric – the 75th percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, highest rate area refers to the State or Territory's area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and the lowest maximum payment rate ceiling for child care centers (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the "base" maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower "base" rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

2.7.4a – Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	$1,060.85	$653.83	9th
Full-Time Licensed Center Preschool (59 months)	$887.65	$515.27	11th
Full-Time Licensed Center School-Age (84 months)	$757.75	$506.61	23rd

2.7.4b – Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	$606.20	$454.65	9th
Full-Time Licensed Center Preschool (59 months)	$541.25	$389.70	6th
Full-Time Licensed Center School-Age (84 months)	$519.60	$368.05	13th

In table 2.7.4c and 2.7.4d, highest rate area refers to the State or Territory's area or geographic region with the highest maximum payment rate ceiling for family child care homes (2.7.4c) and the lowest maximum payment rate ceiling for family child care homes (2.7.4d). Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the "base" maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement

rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower "base" rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

2.7.4c – Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	$757.75	$519.60	14th
Full-Time Licensed FCC Preschool (59 months)	$649.50	$476.30	38th
Full-Time Licensed FCC School-Age (84 months)	$562.90	$433.00	11th

2.7.4d – Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile of the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	$649.50	$411.35	1st
Full-Time Licensed FCC Preschool (59 months)	$541.25	$389.70	16th
Full-Time Licensed FCC School-Age (84 months)	$649.50	$368.05	11th

2.7.5. How are payment rate ceilings for license-exempt providers set?

    a) Describe how license-exempt center payment rates are set: _____

b) Describe how license-exempt family child care home payment rates are set: For unregulated relative providers (i.e., Non-Certified Relative Providers (NCRP)) who provide care, a fixed rate* of $10.50 for full day and $6.00 for part day has been established. The fixed rate is currently set at a level that is 70% of the average actual daily payment that was made to certified family child care homes in the spring of 2001. Experience with unregulated relatives who provide care indicates that they typically are not in the business of providing child care and so do not have normal and customary charges for child care. Additionally, NCRPs are not required to meet any significant health and safety requirements that are required of certified family child care homes. The NCRPs are only required to meet very minimal requirements to receive payment.

*A pilot project was conducted in 1997 to determine the feasibility of setting fixed rates for NCRPs. This pilot was conducted throughout the state and no significant decrease in the number of providers willing to provide care at a fixed rate was experienced. The use of NCRP continues to be utilized at a relatively constant rate.

c) Describe how license-exempt group family child care home payment rates are set: _____

d) Describe how in-home care payment rates are set: See response for 2.7.5.b, NCRPs are paid at the same fixed rate for in-home care.

2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies?
Check which types of tiered reimbursement, 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 and amount and also indicate if the rates were set based on the MRS or another process.

☐ Differential rate for nontraditional hours. Describe _____
☒ Differential rate for children with special needs as defined by the State/Territory. Describe _____

Through the establishment of contracts awarded through a competitive Request for Proposal process, an enhanced child care certificate rate is paid to selected programs that serve children with special child care needs. These programs may provide additional staffing, materials, equipment, curriculum, schedules, environments, family involvement, and program evaluation that ensure each child's capabilities and needs are met.

☐ Differential rate for infants and toddlers. Describe _____

☐ Differential rate for school-age programs. Describe _____

☒ Differential rate for higher quality as defined by the State/Territory. Describe _____

Effective August 1999, the DES Enhanced Rate for Accredited Programs became operational. The intent of the Enhanced Rate is two-fold: 1) to make higher quality (accredited) child care slots available to DES subsidized children whose parents may not be able to afford this care; and 2) to encourage more providers to become accredited. This allows children whose parents are eligible for child care subsidies to enroll in programs providing higher quality of care by reimbursing nationally accredited providers 10 percent higher that the DES maximum rates.

All types of regulated child care programs are included in the tiered reimbursement system (Child Care Centers, Family Child Care Homes, and School-Aged Child Care Programs). The DES adopted the State Board of Education's approved list of center-based accreditation bodies used for the Arizona Department of Education, At-Risk Preschool programs. These include:

ACSI - Association for Christian Schools International
AMI - American Montessori International
AMS - American Montessori Society
NAC - National Accreditation Commission for Early Care & Education Programs
NAEYC - National Association for the Education of Young Children, Academy for Early Childhood Program Accreditation
NECPA - National Early Childhood Program Accreditation

The DES, in consultation with the Child Care Advisory Committee, adopted additional standards that are more specific to home based programs and school age. They include the following:

NAFCC - National Association for Family Child Care
CDA - National Child Development Associate Credential with a specialization in home providers
COAA - Council on Accreditation Afterschool [formerly National After School Association]

☐ Other differential rate. Describe _____

☐ None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are

asked to describe how their payment policies reflect the affordable copayments for families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency…

☒ Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

☐ Pays for provider fees (e.g., registration, meals, and supplies). Describe

☐ Policies vary across region, counties and or geographic areas. Describe _____

☒ Other. Describe Providers are allowed to charge registration fees, transportation fees, and additional incidental fees such as field trips and supplies. Providers are allowed to charge for meals.

2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

a) Number of absent days allowed. Describe   If a provider has a policy to collect money for absences from non-subsidized children, Arizona will pay for up to two paid absence days per month per child.

b) Paying based on enrollment. Describe _____

c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe _____

d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe Arizona has recently mandated through the subsidy contracts that all payments made to regulated child care providers will be paid through direct deposit. Child care providers also have the capability to submit their billings electronically. These bills are entered either from a Child Care Local Office or from the provider's location via the Internet.

2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

     a) **How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1)) _____**

Arizona has established individual maximum payment rates for a full range of providers (i.e., center, group home and home based care) and families have access to and a choice of this range of child care providers. This is evidenced by the fact that of the potential pool of providers with which DES can contract for subsidized care, approximately 73 percent of the licensed centers and 91 percent of the certified group homes in Arizona have Registration Agreements with DES for reimbursement for care. Additionally, DES recruits and enters into a Registration Agreement with any small family child care home that meets health and safety regulations and is willing to contract with DES for the provision of care to eligible children. Therefore the centers and homes are available to provide care to children of eligible families.

As a result, families can and do have access to the vast majority of child care providers in the state. A further indication (that rates provide equal access) can be seen by the patterns of utilization of care across different types of providers. Currently, of all the children receiving CCDF child care through DES, 80 percent receive care in child care centers; 7 percent receive care in certified group; 6 percent receive care in small family child care homes; and 7 percent receive care that is provided by unregulated relative providers.

     b) **How payment rates are adequate based on the most recent local MRS (§98.43(a)(2)) _____**

For Licensed Child Care Centers, Certified Group Homes, and Certified Small Family Homes:

As stated above, Arizona has established individual maximum payment rates for a full range of providers, i.e., center, group home and home based care. These rates further differentiate among ages of children in care, full and part day care and care provided in different geographic regions resulting in 144 unique maximum payment rates that are identified in Attachment 2.7.1.

The rates allow for the reimbursement of child care services at the actual cost of care (normal and customary charges), but not more than the maximum payment for categories of care in local areas. The six local areas are based upon their geographic proximity or common characteristics and are generally defined by the following counties:

District I   - Maricopa
District II - Pima
District III – Apache, Coconino, Navajo, and Yavapai
District IV – La Paz, Mohave, and Yuma
District V   - Gila and Pinal
District VI – Cochise, Graham, Greenlee and, Santa Cruz

In order to ensure that eligible children have equal access to comparable care, DES remains committed to working with Arizona's policy makers to continue to increase rates, and to improving the quality of child care provided. In 2006, the state legislature appropriated funding which allowed the maximum payment rates for child care services to be set at the 75th percentile of the 2000 Child Care Market Rate Survey, effective July 1, 2006. During the 2007 legislative session, funding was appropriated to increase all maximum payment rates by an additional five percent. Due to insufficient federal funding, limited state appropriations and increasing child care caseloads, further rate adjustments were not possible without reducing the number of families in the state receiving assistance. With the economic downturn affecting tax revenues, in early 2009, the legislature reduced the appropriation to the Lead Agency, which resulted in returning the maximum payment rates to the 75th percentile of the 2000 Market Rate Survey. Maximum payment rates have remained stable, at that level, since that time.

A comparison of the aggregate (non-weighted) current 144 maximum payment rates to the aggregate (non-weighted) 75th percentile of the 2012 Survey shows that the current maximum payment rates are approximately 68 percent of the 2012 Survey 75th percentile.

      c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3)) _____

      d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates _____

2.8 Goals for the next Biennium
In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 – Increase the number/percent of providers paid via direct deposit.
Goal 2 – Simplify the language used in documents for clients and providers to promote ease of comprehension.
Goal 3 – Increase the number/percentage of payments processed directly by the child care provider.

PART 3
HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory's child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

1. Ensuring health and safety of children through **licensing and health and safety standards**
2. Establishing **early learning guidelines**
3. Creating pathways to excellence for child care programs through **program quality improvement activities**
4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives.**

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency's individual progress will reported using the Quality Performance Report.

3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

    a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

        ☐ Yes.
        ☒ No. Please identify the State or local (if applicable) entity/agency responsible for licensing: The Arizona Department of Health Services is responsible for the licensing of child care centers and for the certification of child care group homes. However, the Lead Agency, the Arizona Department of Economic Security, does maintain the responsibility for the certification of small family child care homes (including in-home care) as well as oversight for unregulated non-certified relative providers.

    b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.
       Both the licensing requirements for child care centers as well as certification requirements for child care group homes, that are the responsibility of the Arizona Department of Health Services, serve as the CCDF health and safety requirements in Arizona. Similarly the certification requirements for small family child care homes (including in-home care) and policy and oversight requirements for non-certified relative providers, that are the responsibility of the Arizona Department of Economic Security, serve as the CCDF health and safety requirement for these categories of providers.

    c) Do the State/Territory's licensing requirements serve as the CCDF health and safety requirements?

	Center-Based Child Care	Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care ☐ N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	☒	☒	☐	☐
Yes, for some providers in this category	Describe ____ __	Describe ____ __	Describe _____	Describe ____ __
No	☐	☐	☒	☒
Other	Describe Child care centers based on Tribal or military land would be exempt from state licensing/ certification requirements but would be required to meet any applicable Tribal or military requirements and may be eligible to receive subsidies.	Describe Child care group homes based on Tribal or military land would be exempt from state licensing/ certification requirements but would be required to meet any applicable Tribal or military requirements.	Describe Family child care providers who care for fewer than five children for compensation at any one time. Such family child care providers must become certified by the Lead Agency or be blood relatives in order to participate in the CCDF program. Family home child care providers on Tribal or military land would be required to meet applicable Tribal or military requirements.	Describe In-home child care providers. Such in-home providers must become certified by the Lead Agency or be blood relatives in order to participate in the CCDF program. In-home family home child care providers on Tribal or military land would be required to meet applicable Tribal or military requirements.

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care

providers (§98.2). The CCDF definition for each category is listed below. For each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below**. Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
Center-Based Child Care	Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of center-based settings are subject to licensing in your State/Territory *Any facility regularly caring for five or more children for compensation not related to the proprietor within the state of Arizona.* *Child care centers based on Tribal or military land would be considered outside of the state of Arizona. Such facilities would be required to meet any applicable Tribal or military requirements and may be eligible to receive subsidies.*	Describe which types of center-based settings are exempt from licensing in your State/Territory *The following are exempt from licensing and are not eligible to receive subsidies.* *When care is given to children by or in:* *- A religious institution conducting a nursery in conjunction with its religious services or conducting parent-supervised occasional drop-in care;* *- A unit of the public school system, including specialized professional services provided by school districts for the sole purpose of meeting mandated requirements to address the physical and mental impairments;* *- A regularly organized private school engaged in an educational program that may be attended in substitution for public school;* *- Any facility that provides training only in specific subjects, including dancing, drama, music, self-defense or religion and tutoring provided by public schools solely to improve school performance;* *- Any facility that provides only recreational or instructional activities to school age children who may enter into and depart*

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
			from the facility at their own volition; *- Any of the Arizona state schools for the deaf and the blind;* *- A facility that provides only educational instruction for children who are at least three and not older than six years of age if all the following are true:* *(a) The facility instructs only in the core subjects of math, reading and science;* *(b) The facility does not accept state-subsidized tuition for the children;* *(c) A child is present at the facility for not more than two and one-quarter hours a day and not more than three days a week;* *(d) The instruction is not provided in place of care ordinarily provided by a parent or guardian;* *(e) The facility posts a notice that the facility is not licensed;* *(f) The facility requires fingerprint cards of all personnel;* *- A facility that operates a day camp that provides recreational programs to children if all of the following are true:* *(a) The day camp is accredited by a nationally recognized accrediting organization for day camps as approved by the department;* *(b) The day camp operates for less than twenty-four hours a day and less than ten weeks each calendar*

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
			year; *(c) The day camp posts a notice at the facility and on its website that it is not licensed under the laws of Arizona as a* **child care** *facility;* *(d) The day camp provides programs only to children who are at least five years of age;* *(e) The day camp requires fingerprint cards of all personnel.*
Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of group homes are subject to licensing *Any home caring for 5 or more children for compensation unaccompanied by a parent or guardian on a regular basis.* *Child care group homes based on Tribal or military land would be exempt from state licensing/certification requirement but would be required to meet any applicable Tribal or military requirements and may be eligible to receive subsidies.*	Describe which types of group homes are exempt from licensing *Homes caring for fewer than five children for compensation at any one time.*
Family Child Care	Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work. **Reminder** - Do not	Describe which types of family child care home providers are subject to licensing *Family child care providers who care for fewer than five children for compensation at any one time must become certified by theLead Agency or be blood relatives in order to participate in the CCDF program.*	Describe which types of family child care home providers are exempt from licensing *Family child care providers who care for fewer than five children for compensation at any one time.*

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
	check if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	*Family child care providers on Tribal or military land would be required to meet applicable Tribal or military requirements.*	
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. **Reminder** - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	☐ N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing *In-home providers must become certified by the Lead Agency or be blood relatives in order to participate in the CCDF program.* *In-home family home child care providers on Tribal or military land would be required to meet applicable Tribal or militaryrequirements.*	Describe which types of in-home child care providers are exempt from licensing *In home child care providers are generally exempt from licensing.*

Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid's website to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's**. ☒

e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care*.

* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.* Elk Grove Village, IL: American Academy of

Pediatrics; Washington, DC: American Public Health Association. Available online: http://nrckids.org/CFOC3

Indicator	Center-Based Child Care	Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care ☐ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
Do the licensing requirements include **child: staff ratios and group sizes**? If yes, provide the ratio for age specified.	☒ Yes, Child: staff ratio requirement Infant ratio (11 months): *1:5 or 2:11* Toddler ratio (35 months): *1-year-old children 1:6 or 2:13;* *2-year-old children 1:8* Preschool ratio (59 months): *3-year-old children 1:13;* *4-year-old children 1:15* *5-year-old children not school age 1:20;* *School-age children 1:20.* ☐ No ratio requirements. ☐ Yes, Group size requirement Infant group size (11 months):	☒ Yes, Child: staff ratio requirement Infant ratio (11 months): *1:5* Toddler ratio (35 months): *1:5* Preschool ratio (59 months): *1:5* ☐ No ratio requirements. ☒ Yes, Group size requirement Infant group size (11 months): *15* Toddler group size (35 months): *15* Preschool group size (59 months): *15* ☐ No group size requirements.	☒ Yes, Child: staff ratio requirement. List ratio requirement by age group: *No more than two infants. No more than four children for compensation.* ☐ No ratio requirements. ☒ Yes, Group size requirement. List ratio requirement by age group *No more than 6 children (including the providers own)* ☐ No group size requirements.	☒ Yes, Child: staff ratio requirement. List ratio requirement by age group: *No more than two infants. No more than four children for compensation.* ☐ No ratio requirements. ☒ Yes, Group size requirement. List ratio requirement by age group *No more than 6 children* ☐ No group size requirements.

Indicator	Center-Based Child Care	Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care ☐ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
For each indicator, check all requirements for **licensing** that apply, if any.				
	Toddler group size (35 months): Preschool group size (59 months): ☒ No group size requirements.			

Indicator	For each indicator, check all requirements for **licensing** that apply, if any.			
	Center-Based Child Care	**Group Home Child Care** ☐ N/A. Check if your State/Territory does not have group home child care.	**Family Child Care**	**In-Home Care** ☐ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
Do the licensing requirements identify specific educational **credentials for child care directors**?	☒ High school/GED ☒ Child Development Associate (CDA) ☐ State/ Territory Credential ☒ Associate's degree ☒ Bachelor's degree ☐ No credential required for licensing ☒ Other: *Child care experience; Credit hours in early childhood, child development, or a closely-related field from an accredited college or university; Actual hours of instruction, provided in conferences, seminars, lectures, or workshops in early childhood, child development, or a closely-related field; An N.A.C. or C.C.P. credential.*	☒ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☒ Associate's degree ☒ Bachelor's degree ☐ No credential required for licensing ☒ Other: *Child care experience; Credit hours in child growth and development, nutrition psychology or early childhood education from an accredited college or university; Actual hours of instruction, in, child growth and development, nutrition, psychology, early childhood education or management of a child care business.*	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☒ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☒ No credential required for licensing ☐ Other:

Indicator	For each indicator, check all requirements for **licensing** that apply, if any.			
	Center-Based Child Care	**Group Home Child Care** ☐ N/A. Check if your State/Territory does not have group home child care.	**Family Child Care**	**In-Home Care** ☐ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)
Do the licensing requirements identify specific educational **credentials for child care teachers**?	☒ High school/GED ☒ Child Development Associate (CDA) ☐ State/ Territory Credential ☒ Associate's degree ☒ Bachelor's degree ☐ No credential required for licensing ☒ Other: *Child care experience; Credit hours from an accredited college or university, including credit hours in early childhood, child development; N.A.C. or C.C.P. credential.*	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☒ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☒ No credential required for licensing ☐ Other:	☐ High school/GED ☐ Child Development Associate (CDA) ☐ State/ Territory Credential ☐ Associate's degree ☐ Bachelor's degree ☒ No credential required for licensing ☐ Other:
Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year**?	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year ☐ No training requirement ☒ Other: *At least 18 training hours per year*	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year ☐ No training requirement ☒ Other: *At least 12 training hours per year*	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year ☐ No training requirement ☒ Other: *At least 6 training hours per year*	☐ At least 30 training hours required in first year ☐ At least 24 training hours per year after first year ☐ No training requirement ☒ Other: *At least 6 training hours per year*

e) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

☐ Yes. Describe ▨
☒ No

3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

☒ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
☒ Center-Based Child Care	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☒ Other. Describe *The initial inspection.*	☒ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe ▨
☒ Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☒ Other. Describe *The initial inspection.*	☐ Once a Year ☒ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe
☒ Family Child Care Home	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☒ Other. Describe *Family child care homes are subject to three visits during their*	☒ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other.

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
	first year of certification, two visits per year thereafter, at least one per year is unannounced.	Describe _____
☒ In-Home Child Care ☐ N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☒ Other. Describe *Once a year when permission to do so is obtained from the child's parent.*	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe _____

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.

☒ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No

Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.	☒ Yes. Describe *For center-based and group home child care, four hours of training provided by the Arizona Department of Health Services' Bureau of Child Care Licensing (BCCL) is required prior to licensure.*
	☐ No.
	☐ Other. Describe _____
The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.	☒ An on-site inspection is conducted.
	☐ Programs self-certify. Describe _____
	☐ No procedures in place.
	☐ Other. Describe _____
Licensing staff has procedures in place to address violations found in an inspection.	☒ Providers are required to submit plans to correct violations cited during inspections.
	☒ Licensing staff approve the plans of correction submitted by providers.
	☒ Licensing staff verify correction of violation.
	☒ Licensing staff provide technical assistance regarding how to comply with a regulation.
	☐ No procedures in place.
	☐ Other. Describe _____
Licensing staff has procedures in place to issue a	☒ Provisional or probationary license

Licensing Procedures	**Describe** which procedures are used by the State/Territory for enforcement of the licensing requirements.
sanction to a noncompliant facility.	☒ License revocation or non-renewal
	☒ Injunctions through court
	☒ Emergency or immediate closure not through court action
	☒ Fines for regulatory violations
	☐ No procedures in place.
	☐ Other. Describe
The State/Territory has procedures in place to respond to illegally operating child care facilities.	☒ Cease and desist action
	☒ Injunction
	☒ Emergency or immediate closure not through court action
	☒ Fines
	☐ No procedures in place.
	☐ Other. Describe
The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	☒ Yes. Describe *For DHS regulated child care facilities, The Uniform Administrative Hearing Procedures are described in Title 41, Chapter 5, Article 10 (Arizona Revised Statutes § 41-1092 et seq) For DES certified family child care homes, Appeal Hearing Procedures as described in Title 6, Article 75 (Arizona Revised Statutes § 41-1992 et seq)*
	☐ No.
	☐ Other. Describe

c) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

☒ Yes. If "Yes" please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

☐ No

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
☒ **Center-Based Child Care**	☒ Child Abuse Registry	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☒ Director ☒ Teaching staff ☒ Non-teaching staff ☒ Volunteers ☐ Other _____
	☒ State/Territory Criminal Background ☒ Check if State/Territory background check includes fingerprints	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards (which include, a state criminal background check) are issued upon entrance into the system and are valid for six years. Additionally, cardholders are continually crosschecked against all arrests in Arizona. A card is suspended for an arrest for a prohibited offense.*	☒ Director ☒ Teaching staff ☒ Non-teaching staff ☒ Volunteers ☒ Other *The director, teaching staff, nonteaching staff and volunteers must obtain and maintain valid fingerprint clearance cards issued under Arizona Revised Statutes (A.R.S.) Title 41, Chapter 12, Article 3.1. The director, teaching staff, nonteaching staff and volunteers are defined as "child care personnel" in (A.R.S.) § 36-883.02.*
	☒ FBI Criminal Background (e.g., fingerprint)	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards are issued (which include an FBI criminal background check) upon entrance into the system and are valid for six years, at which time (if a renewal is sought) a new FBI background check*	☒ Director ☒ Teaching staff ☒ Non-teaching staff ☒ Volunteers ☒ Other *"Child care personnel" as defined in Title 36, Chapter 7.1, Article 1 (Arizona Revised Statutes § 36-883.02) are required to obtain fingerprint clearance cards.*

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
		is conducted.	
	☐ Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Director ☐ Teaching staff ☐ Non-teaching staff ☐ Volunteers ☐ Other _____
☒ **Group Child Care Homes** ☐ N/A. Check if your State/Territory does not have group home child care.	☒ Child Abuse Registry	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Child abuse registry checks are conducted upon initial contracting to provide services to CCDF eligible children and upon re-contracting.*	☒ Provider ☒ Non-provider residents of the home *Employees of group child care homes who participate in the CCDF are subject to child abuse registry background checks in accordance with A.R.S. § 8-804. This includes the provider and staff.*
	☒ State/Territory Criminal Background ☒ Check if the State/Territory background check includes fingerprints	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards (which include, a state criminal background check) are issued upon entrance into the system and are valid for six years. Additionally, cardholders are continually crosschecked against all arrests in Arizona. A card is suspended for an arrest for a prohibited offense.*	☒ Provider ☒ Non-provider residents of the home *The provider, adult staff members and adult residents at the child care group home must obtain and maintain valid fingerprint clearance cards. See A.R.S. § 36-897 et seq.*
	☒ FBI Criminal Background (e.g.,	☒ Initial Entrance into the System ☐ Checks Conducted Annually	☒ Provider ☒ Non-provider residents of the home

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	fingerprint)	☒ Other. Describe *Fingerprint clearance cards are issued (which include an FBI criminal background check) upon entrance into the system and are valid for six years, at which time (if a renewal is sought) a new FBI background check is conducted.*	*The provider, adult staff members and adult residents at the child care group home must obtain and maintain valid fingerprint clearance cards. See A.R.S. § 36-897 et seq.*
	☐ Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe ▭	☐ Provider ☐ Non-provider residents of the home ▭
☒ **Family Child Care Homes**	☒ Child Abuse Registry	☒ Initial Entrance into the System ☒ Checks Conducted Annually ☐ Other. Describe ▭	☒ Provider ☒ Non-provider residents of the home *The family child care home provider, adult non-provider residents and back up provider are subject to child abuse registry checks. In addition, noncertified relative child care providers are also subject to these checks. See A.R.S. § 46-801.*
	☒ State/Territory Criminal Background ☒ Check if the State/Territory background check includes fingerprints	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards (which include, a state criminal background check) are issued upon entrance into the system and are valid for six years. Additionally, cardholders are continually crosschecked*	☒ Provider ☐ Non-provider residents of the home *The family child care home provider, adult non-provider residents and back up provider are subject to state criminal background checks. In addition, noncertified relative child care providers are also subject to these checks. See*

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
		against all arrests in Arizona. A card is suspended for an arrest for a prohibited offense.	*A.R.S. § 46-801.*
	☒ FBI Criminal Background (e.g., fingerprint)	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards are issued (which include an FBI criminal background check) upon entrance into the system and are valid for six years, at which time (if a renewal is sought) a new FBI background check is conducted.*	☒ Provider ☒ Non-provider residents of the home *The family child care home provider, adult non-provider residents and back up provider are subject to FBI criminal background checks. In addition, noncertified relative child care providers are also subject to these checks. See A.R.S. § 46-801.*
	☐ Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe ▬	☐ Provider ☐ Non-provider residents of the home ▬
☒ **In-Home Child Care Providers** ☐ N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)	☒ Child Abuse Registry	☒ Initial Entrance into the System ☒ Checks Conducted Annually ☐ Other. Describe ▬	☒ Provider ☐ Non-provider residents of the home *The in-home child care home provider is subject to a child abuse registry check. In addition, the noncertified relative in-home child care providers are also subject to these checks. See A.R.S. § 46-801.*
	☒ State/Territory Criminal Background ☒ Check if the	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe	☒ Provider ☐ Non-provider residents of the home *The in-home child*

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
	State/Territory background check includes fingerprints	*Fingerprint clearance cards (which include, a state criminal background check) are issued upon entrance into the system and are valid for six years. Additionally, cardholders are continually crosschecked against all arrests in Arizona. A card is suspended for an arrest for a prohibited offense.*	*care home provider is subject to a state criminal background check. In addition, the noncertified relative in-home child care providers are also subject to these checks.* *See A.R.S. § 46-801.*
	☒ FBI Criminal Background (e.g., fingerprint)	☒ Initial Entrance into the System ☐ Checks Conducted Annually ☒ Other. Describe *Fingerprint clearance cards are issued (which include an FBI criminal background check) upon entrance into the system and are valid for six years, at which time (if a renewal is sought) a new FBI background check is conducted.*	☒ Provider ☐ Non-provider residents of the home *The in-home child care home provider is subject to a FBI criminal background check. In addition, the noncertified relative in-home child care providers are also subject to these checks.* *See A.R.S. § 46-801.*
	☐ Sex Offender Registry	☐ Initial Entrance into the System ☐ Checks Conducted Annually ☐ Other. Describe	☐ Provider ☐ Non-provider residents of the home

d) Please **provide a brief overview** of the State/Territory's process for conducting background checks for child care. In this brief overview, include the following:

Criminal Background Checks
In Arizona, criminal background checks are conducted through the issuance of fingerprint clearance cards. This activity is conducted by the Arizona Department of Public Safety. Arizona Revised Statutes 41-1758.07 describes the violations that would make a provider ineligible to receive a finger print clearance card as well as the process for appeal. A web-link to that statute is:

http://www.azleg.gov/FormatDocument.asp?inDoc=/ars/41/01758-07.htm&Title=41&DocType=ARS

In most instances the individual applying for the fingerprint clearance card is responsible for paying for the associated cost.

Child Abuse Registry Checks
In Arizona, individuals that provide care for children must complete a child abuse registry check conducted by the Arizona Department of Economic Security, Child Protective Services (CPS).

As part of the substantiation process of an allegation of child abuse with CPS, families are afforded an appeal before an Administrative Law Judge (ALJ). During this appeal they are able to dispute the findings and conclusions of a CPS investigation and provide additional evidence. The child abuse registry check only identifies substantiated allegations that have been appealed and the decision upheld by an ALJ, or substantiated allegations that an individual has failed to appeal.

There are no costs to child care staff for the checks. Staff that have substantiated allegations of physical abuse, sexual abuse, or neglect categorized as moderate or high risk, or resulting in the death of a child due to abuse of neglect are prohibited from providing care for CCDF funded children.

> d -1) The cost associated with each type of background check conducted The fee for volunteers for a Fingerprint Clearance Card is $65 and the fee for all others is $67. There is no fee associated with child abuse registry checks.
>
> d-2) Who pays for background checks In most instances the individual applying for the fingerprint clearance card is responsible for paying for the associated cost.
>
> d-3) What types of violations would make providers ineligible for CCDF? Describe Arizona Revised Statutes § 41-1758.07 describes the violations that would make a provider ineligible to receive a finger print clearance card. This includes a person who is subject to registration as a sex offender in Arizona or any other jurisdiction.   In addition, individuals that have substantiated allegations with Arizona Child Protective Services of physical abuse, sexual abuse, or neglect categorized as moderate or high risk, or resulting in the death of a child due to abuse of neglect are prohibited from providing care for CCDF funded children.
>
> d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Describe As part of the substantiation process of an allegation of child abuse with CPS, families are afforded an appeal before an Administrative Law Judge

(ALJ). During this appeal they are able to dispute the findings and conclusions of a CPS investigation and provide additional evidence. The child abuse registry check only identifies substantiated allegations that have been appealed and the decision upheld by an ALJ, or substantiated allegations that an individual has failed to appeal.

The Arizona Board of Fingerprinting has authority to determine good cause exceptions as described in Arizona Revised Statutes § 41-619.55 for providers who wish to appeal the denial of a fingerprint clearance card.

The Lead Agency's decisions based on a provider's failure to clear a fingerprint check or child abuse registry check are not appealable.

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? n/a (658E(c)(2)(E), §98.40(a)(2))

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other "search tools," about child care program licensing status and compliance records?

☒ Yes. Describe Arizona disseminates information about regulated child care facilities by a variety of means. The Child Care Resource & Referral service offers information on currently licensed/certified centers and homes both via a toll-free phone line and on the Internet. The Arizona Department of Health Services' (DHS) Bureau of Child Care Licensing offers information on-line on currently licensed/certified facilities at www.AZCareCheck.com. The DHS also offers the ability to review paper files on licensed centers and certified child care group homes at local offices throughout the state. Paper files are also available for review at local offices of the Arizona Department of Economic Security's (DES) Child Care Administration for DES certified homes.
☐ No

3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

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

a) **Describe** the Lead Agency's health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☐ Physical exam or health statement for providers	☐	☐	☐	☐
☐ Physical exam or health statement for children	☐	☐	☐	☐
☒ Tuberculosis check for providers	☒	☒	☒	☒
☐ Tuberculosis check for children	☐	☐	☐	☐
☒ Provider immunizations	☒	☒	☒	☒
☒ Child immunizations	☒	☒	☒	☒
☒ Hand-washing policy for providers and children	☒	☒	☒	☒
☒ Diapering policy and procedures	☒	☒	☒	☒
☒ Providers to submit a self-certification or complete health and safety checklist	☐	☒	☐	☒
☒ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☒	☐	☒	☐
☐ Other. Describe _____	☐	☐	☐	☐

b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

The Lead Agency requires:	For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.			
	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☒ Fire inspection	☒	☐	☒	☐
☒ Building inspection	☒	☐	☐	☐
☒ Health inspection	☒	☐	☐	☐
☒ Inaccessibility of toxic substances policy	☒	☒	☒	☒
☐ Safe sleep policy	☒	☐	☒	☐
☒ Tobacco exposure reduction	☒	☒	☒	☒
☒ Transportation policy	☒	☒	☒	☒
☒ Providers to submit a self-certification or complete health and safety checklist	☐	☒	☐	☒
☒ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☒	☐	☒	☐
☐ Other. Describe �	☐	☐	☐	☐

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). "On-going" would be some type of routine occurrence (e.g., maintain qualifications each year).

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	First Aid	n/a	At least one staff member on-site must have current certification.
	CPR	n/a	At least one staff who is on-site must have current certification.
	Medication Administration Policies and Practices	n/a	Training topic is included as an option in meeting yearly

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			required hours of training for directors/caregivers.
	Poison Prevention and Safety	n/a	
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Shaken Baby Syndrome and abusive head trauma prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Age appropriate nutrition, feeding, including support for breastfeeding	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Physical Activities	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Recognition and mandatory reporting of suspected child abuse and neglect	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Emergency preparedness and planning response procedures	n/a	Training topic is included as an option in meeting yearly required hours of

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
			training for directors/caregivers.
	Management of common childhood illnesses, including food intolerances and allergies	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Transportation and child passenger safety (if applicable)	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Supervision of children	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Behavior management	n/a	Training topic is included as an option in meeting yearly required hours of training for directors/caregivers.
	Other. Describe At least four hours of Training provided by DHS Bureau of Child Care Licensing.	Required for Owner/ Director.	n/a
Group Home Child	First Aid	n/a	At least one staff who is on-site must have

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Care			current certification.
	CPR	n/a	At least one staff who is on-site must have current certification
	Medication Administration Policies and Practices	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Poison Prevention and Safety	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Shaken Baby Syndrome and abusive head trauma prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Age appropriate nutrition, feeding, including support for breastfeeding	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Physical Activities	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling	n/a	Training topic is included as an option in meeting yearly required hours of

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	of foods		training for provider/staff.
	Recognition and mandatory reporting of suspected child abuse and neglect	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Emergency preparedness and planning response procedures	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Management of common childhood illnesses, including food intolerances and allergies	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Transportation and child passenger safety (if applicable)	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Supervision of children	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Behavior management	n/a	Training topic is included as an option in meeting yearly required hours of training for provider/staff.
	Other. Describe Orientation Training provided by DHS Bureau of Child Care Licensing.	Required for Certificate Holder/ provider.	n/a
Family Child Care Providers	First Aid	Provider and back up must have current certification.	Provider and back up must have current certification.
	CPR	Provider and back up must have current certification.	Provider and back up must have current certification.
	Medication Administration Policies and Practices	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Poison Prevention and Safety	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Shaken Baby Syndrome and abusive head trauma prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Age appropriate nutrition,	n/a	Training topic is

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	feeding, including support for breastfeeding		included as an option in meeting yearly required hours of training for provider and backup provider.
	Physical Activities	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Recognition and mandatory reporting of suspected child abuse and neglect	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Emergency preparedness and planning response procedures	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Management of common childhood illnesses, including food intolerances and allergies	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Transportation and child passenger safety (if applicable)	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Caring for children with special health care needs, mental health needs, and	n/a	Training topic is included as an option in meeting yearly

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	developmental disabilities in compliance with the Americans with Disabilities (ADA) Act		required hours of training for provider and backup provider.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Supervision of children	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Behavior management	n/a	Training topic is included as an option in meeting yearly required hours of training for provider and backup provider.
	Other. Describe Developmentally Appropriate Practice for family child care and child care business practices.	Required for provider.	n/a
In-Home Child Care Providers	First Aid	Provider must have current certification.	Provider must have current certification.
	CPR	Provider must have current certification.	Provider must have current certification.
	Medication Administration Policies and Practices	n/a	Training topic is included as an option in meeting yearly required hours of training for provider
	Poison Prevention and Safety	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Safe Sleep Practices including Sudden Infant	n/a	Training topic is

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Death Syndrome (SIDS) Prevention		included as an option in meeting yearly required hours of training for provider.
	Shaken Baby Syndrome and abusive head trauma prevention	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Age appropriate nutrition, feeding, including support for breastfeeding	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Physical Activities	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Recognition and mandatory reporting of suspected child abuse and neglect	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Emergency preparedness and planning response procedures	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Management of common childhood illnesses, including food intolerances and allergies	n/a	Training topic is included as an option in meeting yearly. required hours of training for provider.
	Transportation and child passenger safety (if applicable)	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Supervision of children	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Behavior management	n/a	Training topic is included as an option in meeting yearly required hours of training for provider.
	Other. Describe Developmentally Appropriate Practice for family child care and child care business practices.	Required	n/a

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii))(A))

☐ All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.

☐ Relative providers are NOT required to meet <u>any</u> health and safety requirements as described in 3.1.2a-c, as appropriate.

☒ Relative providers are subject to certain requirements. Describe the different requirements

Providers who are grandparents (including great-grandparents), aunts, and uncles, (including great-aunts and great-uncles) or siblings (who are not otherwise required), may choose not to meet health and safety requirements described in sections 3.1.2a-c. These providers are referred to as Non-Certified Relative Providers (NCRP). Regardless if they care for children in their own home or the children's

home, NCRPs are not subject to licensing. They are however, subject to the following health and safety requirements:

- The NCRPs shall certify that they are not awaiting trial on and have never been convicted of or admitted committing any criminal offenses specified in state statute and that they have not committed any act of sexual abuse of a child.
- The NCRPs shall certify that they are not the parent or guardian of a child adjudicated to be a dependent child, as defined by state statute.
- The NCRPs shall certify that they have not been denied for cause a license to operate a facility for the care of children in this or another state, nor had a license or certification to operate such a facility revoked.
- The NCRPs shall also be in compliance with state statutory fingerprint requirements.
- The NCRPs must pass a Child Protective Services background check.

e) Provide a web address for the State/Territory's health and safety requirements, if available: n/a

3.1.4 Effective enforcement of the CCDF health and safety requirements.
For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements.

Not applicable, all providers who care for children receiving CCDF assistance are subject to the enforcement procedures described in 3.1.2.

a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced)   n/a

b) Describe whether the Lead Agency uses background checks   CPS and criminal history background checks.

c) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?

☐ Yes. If yes, what documentation, if any, is required? Describe _____
☒ No

d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements   Lead Agency requires a signed Discipline Policy.

☒ Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care

and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?

Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities.

☒ Yes. Describe

Arizona's quality rating and improvement system, Quality First, incorporates developmental screening and referral for children in its Points Scale in the domain of Curriculum and Assessment. The highest standard in this category states that: "Additional child assessment strategies include developmental and sensory screening activities (either provided directly or arranged by the provider) and, when necessary, families are referred to appropriate health or intervention agencies."

First Things First directly funds developmental and health screening of young children in selected areas of Arizona, some of which support screening activities within early care and education programs.

Additionally, Arizona has recently revised and released its Program Guidelines for High Quality Early Education: Birth through Kindergarten. For more information see:

http://www.azed.gov/early-childhood/files/2011/10/program-guidelines-complete.pdf

These guidelines include the following indicator within the section on Program Policies:
"Assessment strategies include developmental screening activities. In the event that systematic monitoring of a child's development indicates the possible need for further evaluation, families are referred to the appropriate health, education, or intervention agency." Screening is also addressed in the Health and Nutrition section, indicating that programs assist families to obtain information about developmental and health screening and follow up with families after screening activities to determine follow up services needed.

☐ No

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

☒ Yes. Describe

Quality First programs are required to have training in the Early Standards, the Infant-Toddler Developmental Guidelines and the Program Guidelines for High Quality Early Education. Arizona utilizes its State Advisory

Council for Early Childhood grant funding to provide statewide training to all Quality First participants. In addition, Quality First Coaches receive intensive training in these standards and guidelines in order to provide in-depth coaching to implement them.

First Things First also funds an inclusion coaching strategy in several areas in Arizona which promotes inclusion of children with special needs in high quality early childhood programs. Inclusion Specialists assist programs to observe for developmental concerns, conduct developmental screening using standardized tools, follow through with referrals for further assessment and services, and take appropriate action to meet the needs of the children within the typical early childhood environment.

☐ No
☐ Other. Describe ▭

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

☒ Yes. Describe

In addition to the inclusion coaching that is available for some early childhood programs in the state, First Things First funds parent and provider outreach and education within communities which address the resources and supports that are available once children are screened and it is determined that follow up assessment and treatment may be needed.

☐ No
☐ Other. Describe ▭

c) Does the State/Territory use developmental screening and referral tools?

☒ Yes. If Yes, provide the name of the tool(s)
Ages and Stages Questionnaire (ASQ), Parents' Evaluation of Developmental Status (PEDS).
☐ No
☐ Other. Describe ▭

3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only

providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

   a) Data on licensing and health and safety. Indicate if the Lead Agency or another agency has access to data on:

☒ Number of licensed programs. Describe (optional) _____
☐ Numbers of programs operating that are legally exempt from licensing. Describe (optional) _____
☒ Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) _____
☒ Number of injuries in child care as defined by the State/Territory. Describe (optional) _____
☒ Number of fatalities in child care as defined by the State/Territory. Describe (optional) _____
☒ Number of monitoring visits received by programs. Describe (optional) _____
☒ Caseload of licensing staff. Describe (optional) _____
☒ Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional) _____
☐ Other. Describe _____
☐ None

   b) **Performance measurement**. What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?   n/a

   c) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.   n/a

3.1.7 Goals for the next Biennium –
In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

The Lead Agency will continue to support, coordinate and collaborate with the Arizona Department of Health Services in identifying areas in need of improvement and aiding in support of licensing improvements.

CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have

added a ruler icon   in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

☒ Birth-to-three
☒ Three-to-five
☒ Five years and older
☐ None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:
Birth to three –
 http://www.azftf.gov/WhoWeAre/Board/Documents/az_infant_toddler_gui delines.pdf

Three to five – http://www.azed.gov/early-childhood/files/2013/02/binder1-standards-f.pdf (currently under revision/realignment)

Five years and older – http://www.azed.gov/standards-practices/

Which State/Territory agency is the lead for the early learning guidelines?
Birth to three - First Things First

Three to five - Arizona Department of Education - Early Childhood Education Unit

Five years and older - Arizona Department of Education - High Academic Standards Division

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?
Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	☒	☒	☒
Social and emotional development	☒	☒	☐
Approaches to learning	☒	☒	☐
Logic and reasoning (e.g., problem-solving)	☒	☒	☐
Language development	☒	☒	☒
Literacy knowledge and skills	☒	☒	☒
Mathematics knowledge and skills	☐	☒	☒
Science knowledge and skills	☐	☒	☒
Creative arts expression (e.g., music, art, drama)	☐	☒	☒
Social studies knowledge and skills	☐	☒	☒
English language development (for dual language learners)	☐	☒	☒
List any domains not covered in the above Cognitive that includes Exploration/Discovery, Memory, Problem Solving, and Imitation/Symbolic Play	☒	☐	☐
Other. Describe _____	☐	☐	☐

3.2.3 To whom are the early learning guidelines disseminated and in what manner?
Check all audiences and methods that your State/Territory has chosen to use in the chart below.

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	☐	☐	☐
Parents using child care more broadly	☒	☐	☐
Practitioners in child care centers	☐	☒	☐
Providers in family child care homes	☐	☒	☐
Practitioners in Head Start	☐	☒	☐
Practitioners in Early Head Start	☐	☒	☐
Practitioners in public Pre-K program	☐	☒	☐
Practitioners in elementary schools	☐	☒	☐
Other. List Institutes of Higher Education, IDEA Preschool, Career & Technical Education Early Childhood Educators, Home Visitors, and Quality First Coaches	☐	☒	☐

3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system?
Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

☐ To define the content of training required to meet licensing requirements
☒ To define the content of training required for program quality improvement standards (e.g., QRIS standards)
☐ To define the content of training required for the career lattice or professional credential
☒ To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
☒ To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
☐ To develop State-/Territory –approved curricula
☐ Other. List _____
☐ None.

3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system?
Check the standards, if any, with which the State/Territory aligns its early learning

guidelines.

☒ Cross-walked to align with Head Start Child Development and Early Learning Framework
☒ Cross-walked to align with K-12 content standards
☐ Cross-walked to align with State/Territory pre-k standards
☐ Cross-walked with accreditation standards
☒ Other. List   The Early Childhood Programs in Career and Technical Education, the requirements for teacher certification in Early Childhood Education and Early Childhood Special Education.
☐ None.

3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.
In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children's progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

1. Are programs required to conduct ongoing assessments of children's progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

    ☒ Yes. Describe   School districts and child care providers serving children ages 3-5 through funding from First Things First, Title I and the Individuals with Disabilities Education Act (IDEA) are required to use Teaching Strategies GOLD, a web-based assessment instrument, to monitor the progress of child development throughout their participation in these programs. Teaching Strategies GOLD is currently aligned to the Arizona Early Learning Standards (2005).

    a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children's needs?

    ☒ Yes. Describe GOLD provides teachers with aggregate quantitative and individual qualitative data that can be accessed and applied to instruction on a daily and weekly basis. All technical assistance, professional development and publications from the Arizona Department of Education Early Childhood Education unit encourage the use of this data along with specific guidance on how to do so.
    ☐ No

☐ Other. Describe ▪▪▪▪▪▪

a-2) If yes, is information on child's progress reported to parents?

☐ Yes. Describe
☐ No
☒ Other. Describe Reporting on a child's progress is strongly encouraged. However, it is up to each district or program to decide on the use the information.

☐ No
☐ Other. Describe ▪▪▪▪▪▪

2. Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

☐ Yes. Describe ▪▪▪▪▪▪

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

☐ Yes. Describe ▪▪▪▪▪▪
☐ No
☐ Other. Describe ▪▪▪▪▪▪

b-2) If yes, are the tools used on all children or samples of children?

☐ All children. Describe ▪▪▪▪▪▪
☐ Samples of children. Describe ▪▪▪▪▪▪
☐ Other. Describe ▪▪▪▪▪▪

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

☐ Yes. Describe ▪▪▪▪▪▪
☐ No
☐ Other. Describe ▪▪▪▪▪▪

☐ No
☒ Other. Describe Arizona is in the process of identifying a kindergarten entry assessment tool. There is not currently one in place at the state level.

3. Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

☐ Yes. Describe ▪▪▪▪▪▪
☐ No
☒ Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –
What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children's attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

    a) **Data on voluntary early learning guidelines**. Indicate if the Lead Agency or another agency has access to data on:

        ☒ Number/percentage of child care providers trained on ELG's for preschool aged children. Describe (optional)
Data is collected on an annual basis, not cumulatively.
        ☒ Number/percentage of child care providers trained on ELG's for infants and toddlers. Describe (optional)
Data is collected on an annual basis, not cumulatively.
        ☐ Number of programs using ELG's in planning for their work. Describe (optional) _____
        ☐ Number of parents trained on or served in family support programs that use ELG's. Describe (optional) _____
        ☒ Other. Describe
Teaching Strategies GOLD, the state-approved assessment instrument for children ages 3-5, provides local and state level access to an alignment report, reflecting children's attainment of the Arizona early learning standards.
        ☐ None

    b) **Performance measurement**. What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines? n/a

    c) **Evaluation**. What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. n/a

3.2.8 Goals for the next Biennium –
In this section, Lead Agencies are asked to identify at least one goal for the upcoming

biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

To document an increase in the number of providers who are trained in the early learning standards.

3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.   The Arizona Early Childhood Development and Health Board (also known as First Things First) plans and administers the Quality Improvement and Rating System known as Quality First.

3.3.1 Element 1 – Program Standards

Definition – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. <u>Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.</u>

a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

☒ Ratios and group size
☐ Health, nutrition and safety
☐ Learning environment and curriculum
☒ Staff/Provider qualifications and professional development
☐ Teacher/providers-child relationships
☐ Teacher/provider instructional practices
☐ Family partnerships and family strengthening
☐ Community relationships
☐ Administration and management
☐ Developmental screenings
☒ Child assessment for the purposes of individualizing instruction and/or targeting program improvement
☐ Cultural competence
☒ Other. Describe
Programs participating in Quality First are assessed, in part, using appropriate Environmental Rating Scales and the Classroom Assessment Scoring System (CLASS™).
☐ None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

☒ Children with special needs as defined by your State/Territory
☒ Infants and toddlers
☐ School-age children
☒ Children who are dual language learners
☐ None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.

☒ Licensing is a pre-requisite for participation

☒ Licensing is the first tier of the quality levels
☐ State/Territory license is a "rated" license.
☐ Other. Describe ▓▓▓▓▓
☐ Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

☒ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
☒ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
☒ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
☐ Other. Describe ▓▓▓▓▓
☐ None

3.3.2 Element 2 –Supports to Programs to Improve Quality

Definition – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.

a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
☒ Attaining and maintaining licensing compliance	☒	☒	☒
☒ Attaining and maintaining quality improvement standards beyond licensing	☒	☒	☒
☒ Attaining and maintaining accreditation	☒	☒	☒
☒ Providing targeted technical assistance in specialized content areas:			
Health and safety	☒	☒	☒
Infant/toddler care	☒	☒	☒

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
School-age care	☒	☒	☒
Inclusion	☒	☒	☒
Teaching dual language learners	☒	☒	☒
Mental health	☒	☒	☒
Business management practices	☒	☒	☒
Other. Describe Early Learning Standards, teacher-child interactions, instructional practice	☒	☒	☒
☐ None. Skip to 3.3.3.			

b) Methods used to customize quality improvement supports to the needs of individual programs include:

☒ Program improvement plans
☒ Technical assistance on the use of program assessment tools
☐ Other. Describe _____

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

☒ Yes. Describe   At a minimum, programs that enter with lower ratings receive technical assistance automatically.
☐ No
☐ Other. Describe _____

3.3.3 Element 3 – Financial Incentives and Supports

Definition – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.

a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
☒ Grants to programs to meet or maintain licensing	☒	☒	☒
☒ Grants to programs to meet QRIS or similar quality level	☒	☒	☒
☒ One-time awards or bonuses on completion of	☒	☒	☒

Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
quality standard attainment			
☒ Tiered reimbursement tied to quality for children receiving subsidy	☒	☒	☒
☒ On-going, periodic grants or stipends tied to improving/maintaining quality	☒	☒	☒
☐ Tax credits tied to meeting program quality standards	☐	☐	☐
☒ Other. Describe In conjunction with QRIS (Quality First) and in addition to the financial incentives and supports described above, First Things First provides a limited number of child care providers with funds to provide child care scholarships (financial help for families with children, birth through age five, and with incomes up to 200 percent of the Federal Poverty Guidelines). These funds provide sustainable funding for providers as part of a comprehensive financing model for the early care and education system.	☒	☒	☒
☐ None. Skip to 3.3.4.	☐	☐	☐

3.3.4 – Element 4 - Quality Assurance and Monitoring

Definition – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.

a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
☒ Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. At a minimum, every other year	☒ Infant/Toddler ☒ Preschool ☐ School-Age	☒	☒
☒ Classroom Assessment Scoring System (CLASS)	☒	N/A	☒

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
Describe, including frequency of assessments. At a minimum, every other year			
☐ Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments.	☐	☐	☐
☒ Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programs Describe, including frequency of assessments. In addition to the other assessment tools, staff qualifications, administrative practices and child assessment/curriculum are measured in determining the quality rating. The frequency of assessment is, at a minimum, every other year. Note: For all "Types of Program Quality Assessment Tools" in the above boxes, License-Exempt Providers describe facilities that are regulated by Tribal or military authority.	☐	☐	☐
☐ Other. Describe _____	☐	☐	☐
☐ None. Skip to 3.3.5.	☐	☐	☐

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

      ☐ Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
      ☐ Include QRIS or other quality reviews as part of licensing enforcement
      ☐ Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
      ☐ Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

☐ Other. Describe ▯
☒ None

3.3.5 – Element 5 - Outreach and Consumer Education

Definition – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.

a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

☒ Yes. If yes, how is it used?
    ☐ Resource and referral/consumer education services use with parents seeking care
    ☐ Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting
    ☐ Searchable database on the web
    ☐ Voluntarily, visibly posted in programs
    ☐ Mandatory to post visibly in programs
    ☐ Used in marketing and public awareness campaigns
    ☒ Other. Describe
    A five star rating system will be publically launched in 2013, but details about specific outreach and consumer education strategies are pending at the time this plan was written.
☐ No. If no, skip to 3.3.6.

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

    ☐ Print
    ☐ Radio
    ☐ Television
    ☐ Web
    ☐ Telephone
    ☐ Social Marketing
    ☒ Other. Describe
    Outreach will likely include most forms of media, but a public media campaign to communicate about the levels (star ratings) of child care is pending.
    ☐ None

c) Describe any targeted outreach for culturally and linguistically diverse families. n/a

3.3.6. Quality Rating and Improvement System (QRIS)

a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5,** does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements <u>operating State/Territory-wide</u>.

    ☐ Participation is voluntary for ______

    ☐ Participation is mandatory for ______

☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements <u>operating as a pilot or in a few localities</u> but not State/Territory-wide.

☒ No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

    ☒ State/Territory is in the development phase

    ☐ State/Territory has no plans for development

☒ Other. Describe A statewide QRIS has been launched and a campaign to educate parents and the general public is expected to begin in the summer of 2013. With the implementation of this consumer education campaign, the QRIS will include linked activities in all five elements.

b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

    ☐ Child care centers
    ☐ Group child care homes
    ☐ Family child care homes
    ☐ In-home child care
    ☐ License exempt providers
    ☐ Early Head Start programs
    ☐ Head Start programs
    ☐ Pre-kindergarten programs
    ☐ School-age programs
    ☐ Other. Describe ______

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe

First Things First offers quality improvement activities to child care provided by family, friend and neighbor (FFN) child care providers who are unregulated. Quality improvement strategies for FFN activities are provided through various approaches.

3.3.8 Data & Performance Measures on Program Quality –
What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

> a) **Data on program quality**. Indicate if the Lead Agency or another agency has access to data on:
>
> ☒ Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional)
> First Things First maintains a database of individual program quality levels on a five star scale.
> ☒ Number of programs that move program quality levels annually (up or down). Describe (optional)
> First Things First maintains a database of individual programs that includes quality level changes.
> ☒ Program scores on program assessment instruments. List instruments:
> ECERS-R, ITERS-R, FCCERS, CLASS and the Arizona Points Scale. Describe (optional)
> ECERS-R, ITERS-R, FCCERS and CLASS are nationally validated assessment tools for early childhood programs in areas of health and safety, environment, curriculum, family involvement, routines and schedules, and teacher-child interactions. The Arizona Points Scale is a locally designed assessment tool that includes staff qualifications, administration practices, child assessment and curriculum.
> ☒ Classroom scores on program assessment instruments. List instruments: ECERS-R, ITERS-R FCCERS, and CLASS Describe (optional) _____
> ☒ Qualifications for teachers or caregivers within each program. Describe (optional) Qualifications are required for completion of the AZ Points Scale.
> ☒ Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) _____
> ☒ Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory
> ☒ Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional)
> The Lead Agency maintains information on accredited facilities that

receive the enhanced rate. First Things First maintains a database of individual programs that includes data on financial assistance, in the form of incentive grants and scholarships, to meet higher standards.

☐ Other. Describe ▬▬▬▬

☐ None

b) **Performance measurement**. What, if any, are the Lead Agency's performance measures on program quality? n/a

c) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

First Things First will conduct a 4-year implementation study of the Quality First system beginning in 2013 - 2014 with a validation study of the 5 star rating scale. Subsequent years will evaluate the fidelity of implementation of the QRIS components and how child outcomes vary according to the Quality First star levels.

3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

1. Plan and implement consumer education and outreach activities for the quality rating system, QualityFirst.
2. Increase the number of child care providers participating in the QIRS, Quality First.

3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

1) Core Knowledge and Competencies
2) Career Pathways (or Career Lattice)
3) Professional Development Capacity
4) Access to Professional Development
5) Compensation, Benefits and Workforce Conditions
a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.
DES, the Lead Agency, works in collaboration with the Arizona Department of Education, Arizona Department of Health Services and Arizona Board of Child Development and Health (First Things First) to plan and administer professional development systems and workforce initiatives.

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

Definition – For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.

a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

☐ Yes
☐ No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.
☒ Other. Describe Arizona developed core competencies in the context of a professional development registry, but the program was eliminated in 2009 due to budget considerations. In 2012, a Professional Development Workgroup (PD Workgroup) began to convene to discuss professional development for the early childhood community. The group includes representatives from the Lead Agency, the Arizona Department of Health, the Arizona Department of Education, Arizona's institutes of higher education, First Things First (FTF), professional development providers, the Arizona Association for the Education of Young Children, philanthropic organizations, and health and family support services. These discussions led to a partnership with the Arizona BUILD Initiative (an early childhood funders' collaborative). The PD Workgroup continues to meet and has the development of core knowledge and competencies as one of its main goals.

If yes, insert web addresses, where possible: ▢

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

☐ Child growth, development and learning
☐ Health, nutrition, and safety
☐ Learning environment and curriculum
☐ Interactions with children
☐ Family and community relationships
☐ Professionalism and leadership
☐ Observation and assessment
☐ Program planning and management
☐ Diversity
☒ Other. Describe CKCs are under development.
☐ None

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

☐ To define the content of training required to meet licensing requirements
☐ To define the content of training required for program quality improvement standards (as reported in section 3.3)
☐ To define the content of training required for the career lattice or credential
☐ To correspond to the early learning guidelines
☐ To define curriculum and degree requirements at institutions of higher education
☒ Other. Describe The CKCs are under development.
☐ None

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

☐ Cross-walked with the Child Development Associate (CDA) competencies
☐ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)
☐ Cross-walked with apprenticeship competencies
☒ Other. Describe The CKCs are under development.
☐ None

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
☐ Administrators in centers (including educational coordinators, directors). Describe _____
☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
☒ Other. Describe The CKCs are under development.
☐ None

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

☐ Birth-to-three
☐ Three-to-five
☐ Five and older
☒ Other. Describe The CKCs are under development.
☐ None

3.4.2 Workforce Element 2 - Career Pathways

Definition – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.

a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

☐ Yes. Describe _____
☒ No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible: _____

b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
☐ Administrators in centers (including educational coordinators, directors). Describe _____
☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
☐ Other. Describe _____
☐ None

c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?

☐ Infants and toddlers
☐ Preschoolers
☐ School-age children
☐ Dual language learners
☐ Children with disabilities, children with developmental delays, and children with other special needs
☐ Other. Describe _____
☐ None

d) In what ways, if any, is the career pathway (or lattice) used?
☐ Voluntary guide and planning resource
☐ Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
☐ Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
☐ Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)
☐ Required placement for participation in scholarship and/or other incentive and support programs
☐ Required placement for participation in the QRIS or other quality improvement system
☐ Other. Describe _____
☐ None

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice?)?

☐ Yes. If yes, describe _____
☐ No

3.4.3 Workforce Element 3 – Professional Development Capacity

Definition – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.

a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

☒ Yes. If yes, describe   The PD Workgroup mentioned in 3.4.1 conducted an environmental scan in late 2012. For details, see www.azftf.gov/WhoWeAre/Board/Documents/Program%20Committee/ProgramCommitteeDecember6,2012/PD%20Environmental%20Scan%202-Yr%20Strat%20Plan.pdf

☐ No

b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

☒ Yes. If yes, describe

DES contracts with a number of entities to provide training and technical assistance throughout the State. In each Arizona County, a single contractor is tasked not only with delivery of these services, but with coordinating the delivery of training in a coordinated manner within that county. Coordination is required with regard to:

a. Age groups served (i.e. infants, toddlers, preschool, school age, mixed age groups, other);
b. Level of expertise of attendees (i.e. beginner, intermediate, and expert) and scheduling to enable cohorts of child care providers to attend related and/or sequential trainings;
c. Need for the training topic as determined by the;
    i. Availability of similar topics currently being provided;
    ii. Location of similar trainings already offered, and;
    iii. Current level of provider participation in these trainings.
d. Geographic location, and;
e. Other child care training funded by the DES Child Care Administration or any other source.

The coordinating contractors are thus contractually required to assess continually the availability of trainings. In addition, the Lead Agency awards training and technical assistance contracts within Arizona

counties at a level roughly proportional to the estimated number of providers in each county.
☐ No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

☒ Standards set by the institution
☒ Standards set by the State/Territory higher education board
☒ Standards set by program accreditors
☐ Standards set by State/Territory departments of education
☐ Standards set by national teacher preparation accrediting agencies
☐ Other. Describe �_____
☐ None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

☐ Training approval process. Describe �_____
☐ Trainer approval process. Describe �_____
☐ Training and/or technical assistance evaluations. Describe �_____
☐ Other. Describe �_____
☒ None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

☒ Yes. If yes, describe Some institutions of higher education have credit by evaluation available.
☐ No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

☐ Yes. If yes, describe �_____
☒ No

3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.

a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

☒ Yes. If yes, for which sectors?
    ☒ Child care
    ☒ Head Start/Early Head Start
    ☒ Pre-Kindergarten
    ☒ Public schools
    ☒ Early intervention/special education
    ☐ Other. Describe _____
☐ No

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

☒ Yes. If yes, describe
The Child Care Resource & Referral (CCR&R) service offers information on professional development opportunities. Information is available to all providers via quarterly newsletter. CCR&R newsletters are mailed and available on-line. CCDF funded trainings must be listed in the newsletter. There is no charge for the newsletter.
☐ No

Insert web addresses, where possible: http://azchildcare.org

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

☒ Scholarships. Describe
The Professional Career Pathway Project (PCPP) offers scholarships for tuition for early childhood education classes offered at community colleges throughout Arizona. For more information, see:
www.centralaz.edu/home/academics/divisions_and_programs/early_care_and_education_program/pcpp.htm
Arizona also has scholarships available through a Teacher Education And Compensation Helps (T.E.A.C.H.) program. For more information, see: www.asccaz.org/teachaz.htm

☒ Free training and education. Describe
Community-based training is available throughout the state at no cost to child care providers. Training is available in a variety of topics, for varying levels of expertise and for different types of child care providers (e.g., home and center based) and age groups (e.g., infant/toddler, preschool and school age). Trainings are typically offered during weekends or evenings to accommodate the schedules of child care providers. All CCDF funded public training is included in CCR&R

newsletters. Some training is delivered on-site to the staff of a specific child care facility and is not open to the public.

☒ Reimbursement for training and education expenses. Describe Program Improvement grants are available through the Quality First program of First Things First. Grants are awarded to enrolled providers based upon needs identified in a Quality Improvement Plan. These grants may be used to cover costs associated with improving quality; this includes training and education expenses.

☒ Grants. Describe
Quality First Program Improvement grants may be used for training and education activities. For more information, see:
www.azftf.gov/WhatWeDo/Programs/QualityFirst/Pages/FinancialIncentivesPlan.aspx

☐ Loans. Describe _____
☐ Loan forgiveness programs. Describe _____
☐ Substitute pools. Describe _____
☒ Release time. Describe
The TEACH program in Arizona subsidizes release time for scholarship recipients.

☐ Other. Describe _____
☐ None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

☐ Yes. If yes, describe _____
☒ No

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

☒ Yes. If yes, describe

DES, the Lead Agency, contracts with a variety of organizations to provide technical assistance (TA) to the child care workforce. TA is provided on-site as well as by phone or email by individual coaches and consultants.

DES contracts with a variety of organizations to identify, recruit, and train family child care providers. These providers care for four or fewer children for compensation and are eligible for subsidy reimbursement for children from eligible families in their care. They are known as certified family child care home providers. The recruiting contractors train and provide paid mentors from existing certified family child care

home providers to provide ongoing support, information sharing and networking to new and existing home providers.

DES funds the Arizona Self Study Project (ASSP), which supports child care facilities wishing to pursue accreditation. ASSP provides on-site coaching assistance and monthly telephone support as well as training, self-study materials and networking opportunities.

First Things First's offers a variety of coaches and consultant services:

- The Quality First coach provides an initial orientation and, when the assessment is completed, the coach reviews the findings with each provider and develops a quality improvement plan. Coaches also assist centers and homes in submitting their requests for financial incentives tied to their Quality Improvement Plan.
- A Child Care Health Consultant (CCHC) is a health professional with specialized training and experience with young children, and provides consultation to child care providers. CCHC's assist child care providers in achieving standards related to the health and safety of children in their care. CCHC's offer periodic visits as well as responding to requests to provide assistance regarding the health of a specific child in care.
- Mental Health consultation is provided by the Smart Support program. Smart Support consultants design individualized plans to meet the needs for children at specific child care sites. Services include training, consultation, implementation of classroom strategies and resources or referrals for specific children or situations.
- Inclusion Coaches work with early childhood education staff to improve their ability to successfully include children with special needs. This may be accomplished by: Helping staff recognize children with delays; educating staff about available resources and referral processes; coordinating with therapists to insure appropriate service delivery; promoting individualized group instruction; and facilitating staff efforts to include families to a greater degree in planning for the services delivered to their child.

☐ No

3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

Definition – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

a) Does the State/Territory have a salary or wage scale for various professional roles?

☐ Yes. If yes, describe ▮▮▮▮▮

☒ No

🖊 b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

☒ Yes. If yes, describe .

The Arizona TEACH model offers a bonus or a raise for completion of an educational program.

☐ No

🖊 c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

☒ Yes. If yes, describe The Professional REWARD$ program. This FTF initiative offers financial incentives to child care professionals working with children birth through age five. The program acknowledges and rewards progressive education, educational attainment and commitment to continuous employment at a child care center, group or family child care home regulated by a federal, state or Tribal authority. Approved child care professionals receive financial incentives ranging from $300 to $2,000 based on their education.

☐ No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

☐ Yes. If yes, describe ▭
☒ No

3.4.6 Data & Performance Measures on the Child Care Workforce –
What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on the child care workforce**. Indicate if the Lead Agency or

another agency has access to data on:

☐ Data on the size of the child care workforce. Describe (optional) ▢

☐ Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional) ▢

☒ Records of individual teachers or caregivers and their qualifications. Describe (optional)

☐ Retention rates. Describe (optional) ▢

☐ Records of individual professional development specialists and their qualifications. Describe (optional) ▢

☒ Qualifications of teachers or caregivers linked to the programs in which they teach. Describe (optional)

☒ Number of scholarships awarded. Describe (optional) ▢

☒ Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional) ▢

☒ Number of credentials and degrees conferred annually. Describe (optional) ▢

☐ Data on T/TA completion or attrition rates. Describe (optional) ▢

☐ Data on degree completion or attrition rates. Describe (optional) ▢

☐ Other. Describe ▢

☐ None

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition– For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

☐ Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____

☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____

☐ Administrators in centers (including educational

coordinators, directors). Describe _____
☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
☐ Other. Describe _____
☐ None

b-2) Does the workforce data system apply to:
☐ all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?
☐ all practitioners working in programs that receive public funds to serve children birth to age 13?
☒ No

c) **Performance measurement**. What, if any, performance measures does the State/Territory use related to its workforce and professional development systems? n/a

d) **Evaluation**. What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. n/a

3.4.7 Goals for the next Biennium –
In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g.,

Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Goal 1 - Develop core workforce knowledge and competencies (WKC) for child care providers and technical assistance (TA) providers.
Goal 2 - Develop a career ladder/lattice for child care providers.
Goal 3 - Design and develop a database to track the professional development of individual child care providers; a professional development workforce registry.