

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

1 Define CCDF Leadership and Coordination with Relevant Systems

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

1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Arkansas Department of Human Services

Street Address: PO Box 1437, Slot S260, Little Rock, AR

City: Little Rock

State: Arkansas

ZIP Code: 72203

Web Address for Lead Agency: <http://humanservices.arkansas.gov/>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Cindy

Lead Agency Official Last Name: Gillespie

Title: Department Director

Phone Number: 501-682-8647

Email Address: cindy.gillespie@dhs.arkansas.gov

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Ivory

CCDF Administrator Last Name: Daniels

Title of the CCDF Administrator: CCDF Program Administrator

Phone Number: 501-320-8927

Email Address: ivory.daniels@dhs.arkansas.gov

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

Street Address: PO Box 1437, Slot S140 Little Rock, AR 72203

City: Little Rock

State: Arkansas

ZIP Code: 72203

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

CCDF Co-Administrator First Name: Ashelyn

CCDF Co-Administrator Last Name: Abney

Title of the CCDF Co-Administrator: Assistant Director

Description of the role of the Co-Administrator: To support the CCDF Administrator in the oversight of CCDF Programs

Phone Number: 501-320-8911

Email Address: ashelyn.abney@dhs.arkansas.gov

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

Street Address: PO Box 1437, Slot S140 Little Rock, AR 72203

City: Little Rock

State: Arkansas

ZIP Code: 72203

1.2 CCDF Policy Decision Authority

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

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

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

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

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

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

- Other.

Describe:

2. Sliding-fee scale is set by the:

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

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

Other.

Describe:

3. Payment rates are set by the:

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

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

Other.

Describe:

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

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

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments

- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

For Federal Pre-K and Early Head Start, the facility determines eligibility for families.

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

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

Describe

c) Who issues payments?

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

Describe

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

The Division of Child Care and Early Childhood Education (DCCECE) works very closely with external and internal entities to ensure quality performance for children and families. DCCECE works closely with the Office of Information Technology and our external partner, The Office of Program and Integrity Unit to ensure the proper use of CCDF funding. Our partners ensure that all funded programs reflect the goals of the Division and comply with all CCDF regulations.

DCCECE program coordinators are required to review cases monthly to ensure accuracy and provide corrective actions to cases with errors. Coordinators are required to conduct random on-site visits to review and ensure that case records contain proper documentation used to determine eligibility.

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

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

Upon request, DHS will gather the requested code base, package it up with any other required files and submit to the proper representative of the requestor. The IT Quality Assurance Management Team has created necessary processes needed to create high-quality deliverables that meet requirements.

Quality assurance reviews are focused on addressing three questions:

- Are the defined processes being followed?
- Are the processes working effectively?
- Are the processes efficient?

Quality Assurance Review Approach

Quality assurance reviews will be performed to evaluate the major processes that are underway at the time (e.g., deliverables, code/test/training execution activities). A QA reviews will be conducted on deliverables that are identified on the statement of work for the project and delivery of those documents are set with the project work plan. QA reviews for code and testing will be conducted as part of the enhancement release schedule. These reviews may include evaluation of the iteration planning activities, daily stand-ups, stakeholder engagement, and management of issues. The Project Management team will manage the schedule of these evaluations, and the Engagement Director and the Engagement Project Manager are responsible for completion of the evaluations.

Quality Assurance Review Findings

The output of quality assurance reviews will be a set of metrics and suggested corrective actions and will be maintained on an accessible SharePoint by DHS and Deloitte. Once these corrective actions are identified, key findings from the quality assurance reviews will be shared with leadership. The Project Management team, Engagement Director and Engagement Project Manager will meet to review the suggestions and mutually determine which, if any, corrective actions will be undertaken. Corrective actions that are approved for implementation will be documented as action items in PMC, and will be tracked to completion.

Quality Improvement Plan

A critical element of the quality assurance process is a parallel effort to analyze and improve

quality processes over time. For example, identifying consistent issues and then implementing changes to processes that address those issues and prevent those problems from reoccurring. The monitoring process includes identifying lessons learned and other feedback loops associated with the review activities to help improve processes and the quality of deliverables throughout the M&O Services time frame.

As part of the Division's contract with Deloitte, we have implemented the following governance structure with business process that will insure accountability of public dollars.

Governance Approach

As part of the M&O Plan, Deloitte has worked with DHS to establish an agreed upon approach for governance of all services in scope including enhancements to the systems. Establishing a strong governance structure with relevant parties assists in aligning the goals of the Business Divisions and IT.

Governance will be provided by 4 distinct bodies for maintenance, operations, and enhancement activities: Maintenance Prioritization Committee (MPC), Change Control Board (CCB), Release Planning Committee (RPC) and Steering Committee.

Maintenance Prioritization Committee (MPC)

The Maintenance Prioritization Committee convenes on a bi-weekly (twice a month) basis and is responsible for reviewing and prioritizing Maintenance and Operations tickets identified by DHS business users and IT. The results of these prioritization efforts define the schedule and scope for the monthly maintenance releases. OST will confirm the prioritization of scope items for the monthly M&O releases.

Change Control Board (CCB)

As part of the creation of the detailed governance process for enhancements within the Project Management Plan, Deloitte proposes a bi-weekly (twice a month) meeting cadence to review and prioritize enhancement requests. Enhancement requests include changes to core applications, non-core applications, and BI and Reporting components.

Release Planning Committee (RPC)

The Release Planning Committee is responsible for managing release schedules and driving the end-to-end release processes. The RPC works with quality assurance, business team,

and technical team members to minimize downtime and impact while confirming the availability of test resources and IT involvement. Releases fall into one of two categories—Minor and Major. Minor releases follow a monthly implementation schedule governed by the MPC while major releases follow a tri-annual implementation schedule governed by the CCB. OST will confirm the prioritization of scope items for the monthly M&O and scheduled enhancement releases.

Steering Committee

The Steering Committee meets monthly to review project status, project progress on key activities and address project risks, issues, decisions, action items, and other requests. The group does not sit on the formal process flow for each problem ticket or enhancement request, rather it will provide direction to the project on escalated risks, issues, and project change requests that could impact project objectives. The committee will assist with maintaining project schedule, budget, scope, and quality on an as-needed basis.

1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).

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

Arkansas employees are required to follow DHS Security and Privacy policies that provide instructions to all DHS offices, facilities, programs and workforce members regarding the provision of a Notice of Privacy Practices to all clients. DHS Security and Privacy Policies identifies what information can be disclosed.

1.3 Consultation in the Development of the CCDF Plan

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

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

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation

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

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

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

The draft plan was shared with our collaborative partners across the state to obtain local community feedback including the five regional Child Care Aware Resource and Referral Agencies and several government agencies.

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

DCCECE forwarded a draft of the state plan to each member of the Arkansas Early Childhood Commission/Statewide Advisory to obtain additional feedback.

Commission members include representation from: various state and local education partners, health professionals, mental health professionals, child care and early childhood education providers, community leaders, parents, and Head Start.

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

Arkansas does not recognize Indian tribes or tribal organizations within the state.

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

The draft plan was sent to the Division of Children and Family Services (DCFS), Department of Workforce Services (DWS), Child Care Resource and Referral Agencies and the Head Start Collaboration Office in the development of the plan. DCCECE has regular contact with members from DCFS and DWS to discuss child care and early education initiatives in Arkansas, as well as any updates or changes regarding child care assistance policies and procedures. Additionally, the state plan was sent to existing contractors for their feedback and input as well.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 06/01/2018

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

b) Date of notice of public hearing (date for the notice of public hearing identified in (a)).
05/11/2018

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

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

The CCDF Public hearing notice was posted on our Arkansas Department of Human Services website. The website is accessible to the general public. The hearing notice was also shared on our Provider Participant billing site including and our Arkansas Better Chance site. Based on the data from previous public hearings, The public hearing was scheduled in Central Arkansas. The notice was also distributed by our Resource and Referral Agencies. The public notice can be found using the following link:

https://humanservices.arkansas.gov/images/uploads/dccece/Notice_of_Public_Hearing_1.9.2016.pdf

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The hearing site was scheduled in Central Arkansas, Pulaski County.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)

The Plan was posted on our DHS Billing site and our DHS website at <http://humanservices.arkansas.gov/Pages/default.aspx>

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? DHS reviews and considers all public comments for plan modification, if necessary.

1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)

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

https://humanservices.arkansas.gov/images/uploads/dccece/Notice_of_Public_Hearing_1.9.2016.pdf

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

Working with advisory committees.

Describe:

The CCDF state plan was shared with our Arkansas Early Childhood Commission for public comments.

Working with child care resource and referral agencies.

Describe:

DCCECE shared the CCDF State Plan and will share any amendments to the plan with them on the DCCECE website. The Division also partnered with our Child Care Aware Agencies and contractors to place the state plan on their websites.

Providing translation in other languages.

Describe:

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

Describe:

Information was made available using the DCCECE website and email.

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

Describe:

Information was made available using the DCCECE billing website for provider groups

- Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

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

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;

- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

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

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

Describe the coordination goals and process:

DCCECE has made available child care search and AECAM to help local government build and expand early childhood quality.

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

Describe the coordination goals and process:

Arkansas Early Childhood Commission was in place prior to the Head Start Act. The commission meets on a quarterly basis and establishes goals for DCCECE, including providing input to the CCDF State plan. While we do not have official representation, meeting are coordinated by the lead agency.

- Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

- (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes.

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

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

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

- (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and and Part B, Section 619 for preschool).

Describe the coordination goals and process:

DCCECE staff serve on Arkansas's Inter- Agency Coordinating Council to address the needs of infants and toddlers with disabilities. DCCECE staff meets

with the Department of Education/Special ED monthly to coordinate services in regards to part B. Children with special needs are considered a high priority for service and programs receive higher reimbursement rates for children with disabilities.

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

Describe the coordination goals and process:

DCCECE works with the Head Start Collaboration Office to develop shared goals and plans to meet families and children's needs.

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

Describe the coordination goals and process:

DHS/DCCECE collaborate with staff from the Department of Health to ensure that children in child care facilities are referred and provided EPSDT screenings.

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

Describe the coordination goals and process:

DCCECE works with the Department of Workforce Services (DWS) to bring quality services to TANF families.

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

Describe the coordination goals and process:

DCCECE is responsible for administering Pre-K (Arkansas Better Chance) in the State including federal expansion funds. DCCECE also coordinates with School-Age Head Start to provide quality services to families. Pre-K and Head Start programs provide seven (7) to eight (8) hours of early childhood education which allows CCDF to provide extended time for up to ten (10)hours of high quality early childhood education.

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

Describe the coordination goals and process:

Licensing updated rules and regulations to help improve quality. All CCDF programs must meet minimum licensing and Better Beginnings standards, Level 1, on a minimum.

- (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

DHS DCCECE Health and Nutrition Unit works closely with the DCCECE Family Support Unit and share a common commitment to serving families with high quality care and education for all children served in licensed care. Arkansas's Health and Nutrition program serves as a resource to licensed child care facilities to provide information and support so that children receive balanced and nutritious meals.

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

Describe the coordination goals and process:

DCCECE plans to work with the Arkansas Department of Education (ADE) homeless coordinator to facilitate the transition of children from early learning environments to schools. DCCECE will also partner with Arkansas Out of School Network (AOSN) to review and ensure that school days are optimized to ensure the successful transition and alignment.

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

Describe the coordination goals and process:

DCCECE works with DWS to help families work toward self-sufficiency through multiple programs. Recipients receive child care assistance for approved work, job search, job readiness and educational services through Career Pathways of Arkansas.

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

Describe the coordination goals and process:

DCCECE staff serve on the Interagency Coordinating Council of which DHS Division of Medical Services is a key partner.

(REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

DCCECE staff serve on the Interagency Coordinating Council with the Division of Behavioral Health Services to ensure the provision of public mental health and substance abuse prevention, treatment and recovery services are provided throughout the State of Arkansas. In addition, DCCECE partners with University of Arkansas for Medical Sciences (UAMS) partners who conduct mental health consultation services for CCDF children.

(REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.

Describe the coordination goals and process:

DCCECE funds the operation of five Child Care Aware Resource and Referral Agencies (CCR&R), each with responsibility for a defined region of the state. The CCR&R agencies work in collaboration with DCCECE's other professional development contractors. Together, they provide training and technical assistance at no charge to child care providers. The contractors strive to educate the early care and education workforce and increase the quality of care for Arkansas' children.

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

Describe the coordination goals and process:

DCCECE partners, at the state level, with a variety of public and private organizations including the Arkansas Out of School Network and has developed extensive networks and long-standing partnerships with the following agencies and organizations/commissions to further promote the goals established by the Arkansas Early Childhood Commission.

- (REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

Arkansas departments, agencies, commissions, and offices having roles in emergency response participate in preparedness and recovery. As provided in Arkansas Code Annotated § 12-75-116, each state agency has appointed an Emergency Management Liaison Officer (EMLO). The EMLO is ADEM's point of contact at that agency. In addition, certain agencies have taken responsibility for coordination of an Emergency Support Function. Each of these has a point of contact (ESF POC) who may or may not be the EMLO to ADEM. Many agencies appoint the same person to both positions.

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

- State/territory/local agencies with Early Head Start - Child Care Partnership grants.

Describe

DCCECE is a critical partner in guiding and facilitating training and support to grantees, as well as referrals of CCDF-eligible recipients, including some waitlist clients, to expand accessibility. Working with these grantees increases our capacity to serve more infants and toddlers which is a goal of the Arkansas Early Childhood Commission. Arkansas is now an EHS-CCP grantee and has a team of employees to support this program.

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

Describe

DCCECE works closely with institutions of higher education. Higher education leaders provide professional development services to the early education field and actively participate on DCCECE state-level work groups. DCCECE meets monthly with the Arkansas Early Childhood Cohort, a group comprised of representatives from two and four-year colleges. The cohort initially formed to develop a set of common courses and core competencies to be included in the AAS in Early Childhood degree. In addition, DCCECE attends monthly Deans' Council meetings and collaborates with the Arkansas Department of Higher

Education.

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

Describe

DCCECE provides funding to support the work of the Arkansas Out of School Network and the Arkansas 4-H Center.

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

Describe

DCCECE partners with the Arkansas Department of Health which receives federal grant funds to implement the Maternal, Infant and Early Childhood Home Visiting (MIECHV) program. DCCECE also refers qualifying families to this program.

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

Describe

- State/territory agency responsible for child welfare.

Describe

DCCECE is collaborating with the DHS Division of Children and Family Services (DCFS) Program to ensure that children who are in foster care are placed in quality early learning environments to help minimize multiple placements. Targeted professional development opportunities are being explored to educate caseworkers and early childhood professionals who work with children who have experienced trauma.

- State/territory liaison for military child care programs.

Describe

DCCECE staff serve on the Interagency Coordinating Council with the Division of Behavioral Health Services to ensure the provision of public mental health and substance abuse prevention, treatment and recovery services are provided throughout the State of Arkansas. In addition, DCCECE partners with University

of Arkansas for Medical Sciences (UAMS) partners who conduct mental health consultation services for CCDF children. DCCECE allows the Early Childhood Curriculum Coordinator for the Little Rock Air Force Base to participate in train-the-trainer workshops and use the training curricula and materials with Military Family Child Care Homes and the Child Development Center is on base.

[Provider groups or associations.](#)

[Describe](#)

DCCECE works with local groups and associations including, but not limited to, the Arkansas Out of School Network (AOSN), Arkansas Head Start Association, Arkansas Family Child Care Association, and the Arkansas Early Childhood Association to educate providers to ensure that children are appropriately referred to quality settings.

[Parent groups or organizations.](#)

[Describe](#)

DCCECE partners with the Arkansas Head Start Collaboration Office to implement a Statewide Fatherhood Initiative and State Parent Advisory Council. In 2014, the Statewide Fatherhood Initiative was created to engage fathers in the well-being of their children. Resources and activities were implemented to improve fatherhood engagement in the state. As a result of this partnership, an Arkansas Guide for Promoting Family Engagement was created, Fatherhood Mentorship, and a High 5 for Dads initiative that encourages dads to be more involved in their child's social-emotional, developmental and educational endeavors.

[Other.](#)

[Describe](#)

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

Optional Use of Combined Funds:

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

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

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

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

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

The process of integrating funds from different sources (e.g., EHS-CCP and CCDF monies) to enhance the quality of services provided by local child care providers to parents and children who meet eligibility criteria.

b) Which funds you will combine

The Early Head Start Grant/CCDF and CCDF/Arkansas Better Chance.

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

Arkansas was awarded funding from Round 1 and Round 2 of the Early Head Start - Child Care Partnerships (EHS-CCP). Arkansas pledged to support Round 1 of the EHS-CCP by providing subsidies to 100% of the CCDF eligible children enrolled in EHS-CCP. Due to funding constraints, Arkansas pledged to support Round 2 of the EHS-CCP by providing subsidies to 50% of the CCDF eligible children enrolled in EHS-CCP.

The purpose for layering these funds is to enhance the provision of quality services for infants and toddlers served. Arkansas has combined funds to support and increase quality for infants and toddlers in different ways:

The purpose and expected outcomes for combining funds for Early Head Start - Child Care Partnerships (EHS-CCP) and CCDF is to:

- **Support states and communities in expanding high quality early learning and development opportunities for infants and toddlers**
- **Support the EHS program in making full-day services available for eligible children and families.**
- **Assist in moving children off of the CCDF waitlist**
- **Provide comprehensive services that benefit children, families, and teachers, including:**

Higher health, safety and nutrition standards

Increased professional development opportunities for teachers

Increased parent engagement opportunities
Health, developmental and behavioral screening

The purpose and expected outcomes for combining funds for Arkansas Better Chance (ABC) and CCDF is to:

- Support the required level of quality in programs that have not received funding increases

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

Funding is combined at the program level.

e) How are the funds tracked and method of oversight

Funds are tracked and monitored using Arkansas' data base management system, KidCare, as well as through our state's AASIS financial system.

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

Note:

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

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

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be

under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

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

-- If checked, identify the source of funds:

State General Revenue

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ 4378455

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

-- If checked, are those funds:

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

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

N/A

-- If known, identify the estimated amount of private donated funds that the Lead Agency will receive: \$ 00000

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

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

-- If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

Both programs are managed and administrated by the Division of Child Care

and Early Childhood Education (DCCECE) and are licensed and monitored by the division. Both programs share common goals with regard to quality and in fact share facilities and individual classrooms in some situations. The State's quality Pre-K Program, Arkansas Better Chance for School Success (ABCSS), is licensed and contractually managed by the Lead Agency for the block grant. These Pre-K contracts are with differing entities that include:

- Local School Districts
- Regional Educational Service Cooperatives
- Head Start Grantees
- Community-Based and Faith-Based Non-Profit Organizations
- Universities
- Housing Authorities
- Community Development Corporations
- Hospitals
- Economic Opportunity Corporations

-These providers utilize a maximum income limit of 200% of Federal Poverty Level to determine eligibility for working families in this program. Many of the same providers participating in ABCSS also participate in the Child Care Assistance Program.

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$ 2100000

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

State funded Pre-K Programs receive information about the child care voucher program to assist parents in provision of wrap-around services to extend hours of service to meet the needs of working families. The State funded Pre-K programs are mandated to provide service 178 days annually and 7.5 hours daily. Children of working parents may receive after-care in the same setting or may be transported by the program to another care program. Vouchers are an available option for extending care. The State funded programs are encouraged to offer extended care and care during summer months for working families, when possible.

- State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,
-- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

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

State funded Pre-K Programs receive information about the child care voucher program to assist parents in provision of wrap-around services to extend hours of service to meet the needs of working families. The State funded Pre-K programs are mandated to provide service 178 days annually and 7.5 hours daily. Children of working parents may receive after-care in the same setting or may be transported by the program to another care program. Vouchers are an available option for extending care. The State funded programs are encouraged to offer extended care and care during summer months for working families

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

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

Both programs are managed and administrated by the Division of Child Care and Early Childhood Education and are licensed and monitored by the division. Both programs share common goals with regard to quality and in fact share facilities and individual classrooms in some situations.

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$ 377308

1.6 Public-Private Partnerships

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

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

DCCECE partners, at the state level, with a variety of public and private organizations and has developed extensive networks and long-standing partnerships with the following agencies and organizations/commissions to further promote the goals established by the Arkansas Early Childhood Commission: Arkansas Department of Education, Arkansas Department of Higher Education, Arkansas Department of Health, Arkansas Early Childhood Commission, Arkansas Department of Workforce Services, Arkansas Head Start Association, Arkansas Out of School Network, Arkansas Interagency Coordinating Council, Arkansas Head Start Collaboration Office, Arkansas Maternal, Infant, and Early Childhood Home Visiting Program, Arkansas Coalition for Obesity Prevention, Arkansas Department of Human Services (AR DHS) Division of Medical Services, AR DHS Division of Developmental Disabilities, AR DHS Division of Children and Family Services and the AR DHS Division of Behavioral Health. The Division was awarded an EHS-CCP grant in 2017 to enhance the provision of services to infants and toddlers in the state. Through these partnerships, programs will be able to elevate their facilities and service delivery to meet Early Head Start performance standards.

Working with partners, we collaborate to ensure that the following goals are being met and addressed:

- 1. Improve the overall quality of care in infant and toddler programs**
- 2. Engage families in the child's education through research-based programs that enhance child outcomes and success in school**
- 3. State policies should create an integrated system of professional development uniting the early childhood sectors- child care; HS; pre-k; public schools; early intervention and special education services. (Adopted from Workforce Designs Nation Association for the Education of Young Children)**
- 4. Support restructuring, expanding and growing Better Beginnings/Quality Rating Improvement System**
- 5. Strengthen and expand local and state partnerships with other agencies and organizations for connected action (Established April 2009)**
- 6. Create awareness of Health and Nutrition Programs and educate parents, children and childcare providers on the benefits of a healthy lifestyle.**

DCCECE meets on a quarterly basis with the Arkansas Early Childhood Commission to update them on how we are doing to address each of the aforementioned goals.

The role of Arkansas' Early Childhood Commission changed to an advisory role and that efforts continue to forge partnerships and receive valuable feedback from this group. DCCECE staff routinely participate in meetings held by each entity which at a minimum meets quarterly. As a result of these partnerships, DCCECE has been able to receive valuable input to develop grant applications such as the Race to the Top, Kellogg Foundation, and Pre-K Expansion and Development grant.

Arkansas was the 7th state to receive an Early Head Start-Child Care Partnership grant. DCCECE worked with statewide entities to engage local organizations in submission of grant applications and offered technical assistance and support, where needed. These collaborations have helped the Division of Child Care and Early Childhood Education (DCCECE) to receive a federal Pre-K Expansion and Development grant that supports the expansion and improvement of high quality preschool programs for four (4) year olds only in eleven (11) high need communities. County/Local Programs DCCECE collaborates with Resource and Referral agencies (Child Care Aware) and university systems to offer technical assistance and trainings statewide to help increase the quality of child care services offered. For example, effective January 1, 2016, all child care providers participating in the CCDF program must meet Better Beginnings Level 1 requirements through the state's quality rating

improvement system. DCCECE hosts, at a minimum, quarterly meetings with Child Care Aware agencies. DCCECE also works with these entities to educate providers and staff on expulsion and suspension rules and leverages local resources to help address the needs of children who have experienced traumatic events.

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

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

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

- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

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

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

No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R organization?

DCCECE oversees the Arkansas Child Care Aware Resource and Referral Network and maintains a seat on the national State Network Leadership Council. DCCECE contracts with five CCR&R agencies with 13 offices across the state that together form Arkansas' network. Each CCR&R agency is responsible for providing services to a specific region of the state to include: professional development, technical assistance and a lending library of educational materials. The CCR&Rs offer a variety of trainings including Pre-Licensing, Ages and Stages Questionnaires, Family Child Care Business Management, Family Engagement and Nutrition and Physical Activity Self-Assessment for Child Care. Offering these services allows the state to foster one-on-one relationships with early education and care professionals and the families they serve.

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

DCCECE oversees the Arkansas Child Care Aware Resource and Referral Network and maintains a seat on the national State Network Leadership Council. There are five CCR&R agencies with 13 offices across the state that together form Arkansas' network. Each CCR&R agency is responsible for providing services to a designated region of the state. DCCECE facilitates a minimum of four state network meetings per fiscal year.

1.8 Disaster Preparedness and Response Plan

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

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

Arkansas has required each child care facility to have their own Child Care Disaster Plan while as a state we followed The Arkansas Comprehensive Emergency Management Plan (ACEMP). The ACEMP was revised September 30, 2018 and includes directives on how local, state, and federal government responders will react efficiently to save lives and property. The plan is written and maintained by the Arkansas Department of Emergency Management for government decision makers, private sector business and nongovernmental stakeholders and emergency management practitioners. The directive can be found here:

<https://www.adem.arkansas.gov/Websites/ardem/images/ARCEMP,%20September%2030>,

Using this newly revised ACEMP, DCCECE is in the process of collaborating with the required entities to develop a uniform Statewide Child Care Disaster Plan. Additionally, our Child Care Aware of Northcentral Arkansas has been working with the state to create an Arkansas Children's Disaster Reunification Plan, with the collaboration of the National Center for Missing and Exploited Children (NCMEC). Stakeholders from various agencies within the state are assisting with the draft of this plan.

1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:

The Division of Child Care and Early Childhood Education has revised its Child Care Licensing Procedure Manual (section 2) to include guidelines for continuation of services after a disaster. This information is in a PDF document housed on the DHS SHARE site. See a description of this procedure below.

NATURAL DISASTERS

In the event a tornado, severe ice storm, flooding, chemical spill or other major event or disaster causing structural damage, requiring evacuation, or extended loss of utilities which disrupts child care the Specialist will compile a list of the following:

- The name and address of each facility unable to provide childcare**
- The licensed capacity of each affected facility**
- The reason the facilities are closed (power outage, building damage, inaccessible due to water, trees, and etc.)**
- The expected duration of interrupted childcare services**

This list will be forwarded by electronic mail to the area Supervisor. The Supervisor

will forward the information to the Child Care Licensing/Better Beginnings Program Manager, Associate Director of Licensing and Accreditation. Within 24 hours the Specialist will key required information into DHS Share under DCCECE, Licensing, Facility Outages and Closures.

Please note this does not include routine inclement weather days.

FACILITY DAMAGE CAUSING TEMPORARY RELOCATION

When a facility is damaged by fire, water, etc. to the extent it cannot be occupied and the facility must temporarily relocate approval must be obtained before occupancy by the child care facility. In order to obtain approval, the temporary location must have the following:

- Fire safety approval
- Health approval for food preparation
- A health and safety walk through by the assigned Specialist
- A letter from the facility stating how long they expect to occupy the temporary location before moving back to the original location

Within one business day the Specialist must electronically mail the details of the relocation and expected duration to the following:

- Area Supervisor
- Child Care Licensing/Better Beginnings Program Manager
- Associate Director of Licensing and Accreditation the Child Care
- Special Nutrition Program Administrator
- Family Support Administrator
- Compliance Administrator
- ABC Administrator
- Better Beginnings Program Coordinator

Note: The relocation will not require an application.

<https://humanservices.arkansas.gov/images/uploads/dccece/2014A1CCC-CleanCopyFinalFiling.pdf> Section 1201.3

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

The Division of Child Care and Early Childhood Education has revised its Child Care Licensing Procedure Manual to include guidelines for continuation of services after a disaster. We further work with other Arkansas departments, agencies, commissions, and offices having roles in emergency response for coordination of child care services.

NATURAL DISASTERS

In the event a tornado, severe ice storm, flooding, chemical spill or other major event or disaster causing structural damage, requiring evacuation, or extended loss of utilities which disrupts child care the Specialist will compile a list of the following:

- The name and address of each facility unable to provide childcare
- The licensed capacity of each affected facility
- The reason the facilities are closed (power outage, building damage, inaccessible due to water, trees, and etc.)
- The expected duration of interrupted childcare services

This list will be forwarded by electronic mail to the area Supervisor. The Supervisor will forward the information to the Child Care Licensing/Better Beginnings Program Manager, Associate Director of Licensing and Accreditation. Within 24 hours the Specialist will key required information into DHS Share under DCCECE, Licensing, Facility Outages and Closures.

Please note this does not include routine inclement weather days.

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When a facility is damaged by fire, water, etc. to the extent it cannot be occupied and the facility must temporarily relocate approval must be obtained before occupancy by the child care facility. In order to obtain approval, the temporary location must have the following:

- Fire safety approval**
- Health approval for food preparation**
- A health and safety walk through by the assigned Specialist**
- A letter from the facility stating how long they expect to occupy the temporary location before moving back to the original location**

Within one business the Specialist must electronically mail the details of the relocation and expected duration to the following:

- Area Supervisor**
- Child Care Licensing/Better Beginnings Program Manager**
- Associate Director of Licensing and Accreditation the Child Care**
- Special Nutrition Program Administrator**
- Family Support Administrator**
- Compliance Administrator**
- ABC Administrator**
- Better Beginnings Program Coordinator**

Note: The relocation will not require an application.

1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:

The Minimum Licensing Requirements mandate providers to have written procedures for disaster preparation. Arkansas Law required providers to coordinate with Office of

Emergency Management to plan for disasters and provide Office of Emergency Management with information of each facility that will assist in emergency situations.

In addition the Division of Child Care and Early Childhood Education has revised its Child Care Licensing Procedure Manual to include guidelines for continuation of services after a disaster.

CRITICAL ISSUES

Critical issues are those occurrences or omissions that can be expected to become noteworthy in the media or in the political arena. Examples are child maltreatment reports, child deaths, severe injuries, severe abuse, lost children, runaway children, natural catastrophes, etc. This list is not all inclusive. If the Specialist is unsure if a situation falls into the “Critical Issue” realm they should contact the Supervisor for assistance in making the appropriate decision.

Critical issues must be reported by calling your Supervisor as soon as sufficient information is available to identify the facility and some minimal detail of the incident or issue. A notification should be electronically mailed to the area Supervisor for approval after they have been notified. Once the approval has been given the Specialist will send an electronic mail message to the people on the Critical Issue Notification List which is found in the appendix. The word “SENSITIVE” must be entered in the subject line of the electronic mail. The Specialist must then obtain sufficient information to do the following:

- Identify all children and staff involved.**
- Give a description of what occurred with details such as when and where it happened.**
- Provide the current status or condition of the facility, staff and children involved.**
- Identify any other agencies involved such as law enforcement, DCFS, or CACD.**
- Provide details on any interim corrective action in place.**
- Contact the area Supervisor for direction or guidance if assistance is needed.**

SAFETY REQUIREMENTS

The Safety section of the Minimum Licensing Requirements (Section 1200-1201, centers) mandates that providers have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb

threats, etc.) There is a sample Child Care Emergency Plan on the DCCECE web site at:

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-licensing/child-care-licensing-support>

This is a technical assistance tool that providers may use as a guide when developing a plan, specific to their program.

LOCKDOWN PROCEDURES

While Minimum Licensing Requirements do not specifically address lockdown procedures, they are an important and necessary part of the Child Care Emergency Plan. When reviewing the plans on site, the Licensing Specialist shall provide technical assistance regarding lockdown procedures. If these procedures are not included the Specialist will follow up at the next visit and verify that lockdown procedures have been added to the plan.

NATURAL DISASTERS

In the event a tornado, severe ice storm, flooding, chemical spill or other major event or disaster causing structural damage, requiring evacuation, or extended loss of utilities which disrupts child care the Specialist will compile a list of the following:

- The name and address of each facility unable to provide childcare
- The licensed capacity of each affected facility
- The reason the facilities are closed (power outage, building damage, inaccessible due to water, trees, and etc.)
- The expected duration of interrupted childcare services

This list will be forwarded by electronic mail to the area Supervisor. The Supervisor will forward the information to the Child Care Licensing/Better Beginnings Program Manager, Associate Director of Licensing and Accreditation. Within 24 hours the Specialist will key required information into DHS Share under DCCECE, Licensing, Facility Outages and Closures.

Please note this does not include routine inclement weather days.

FACILITY DAMAGE CAUSING TEMPORARY RELOCATION

When a facility is damaged by fire, water, etc. to the extent it cannot be occupied and the facility must temporarily relocate approval must be obtained before occupancy by the child care facility. In order to obtain approval, the temporary location must have the following:

- Fire safety approval**
- Health approval for food preparation**
- A health and safety walk through by the assigned Specialist**
- A letter from the facility stating how long they expect to occupy the temporary location before moving back to the original location**

Within one business the Specialist must electronically mail the details of the relocation and expected duration to the following:

- Area Supervisor**
- Child Care Licensing/Better Beginnings Program Manager**
- Associate Director of Licensing and Accreditation the Child Care**
- Special Nutrition Program Administrator**
- Family Support Administrator**
- Compliance Administrator**
- ABC Administrator**
- Better Beginnings Program Coordinator**

Note: The relocation will not require an application.

1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):

All providers who provide services must comply with the minimum licensing requirements which includes having a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats,

etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff. Minimum Licensing Requirements also require providers to practice drills monthly. Licensing Specialists monitor this at each of the three annual monitor visits.

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

<https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-licensing>

2 Promote Family Engagement through Outreach and Consumer Education

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

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

research and best practices concerning children's development, including their social-emotional development, is shared.

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

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

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

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

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

Describe:

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

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

Describe:

2.2 Parental Complaint Process

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

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

Parents can submit complaints to the agency or division's 1-800 number or they can also submit complaints using the agency's website.

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

When a report is received from someone alleging abuse or neglect or a violation of minimum standards or licensing requirements, licensing staff investigate to determine the validity of the allegations and to make sure corrective action is implemented. Complaints that are not related to abuse, neglect, or exploitation, or minimum licensing requirements are evaluated by DCCECE Family Support Unit. DCCECE will respond to the complaint and work with the provider to address any issues identified.

If a complaint concerning one of the four critical areas (staff child ratio, supervision, behavior guidance, or transportation) is received, the Specialist will immediately review the facility file for any past issues pertinent to the complaint subject matter.

Any complaint concerning one of the four critical areas of compliance, or any other issue that poses a potential of immediate risk to health and safety, will be initiated by the investigating Specialist by the close of the business day following receipt of the complaint.

If, during the response to a complaint, the Specialist learns that more than one incident occurred or more than one child was involved, the situation will be considered one complaint. There will not be an additional complaint entered into the system for each of the other incidents discovered. Those may be handled by citing as deficiencies found during the investigation of the original complaint or as technical assistance with the person in charge of the facility.

Complaint investigations of issues other than one of the four critical areas must be initiated within three business days, and the initiation date and narrative noted in CCLAS within one business day of initiation. Initiation means a site visit or a face to face interview with the child or staff involved. Interim corrective action shall be put in place at this time to reduce the risk of harm children in care.

The Specialist shall notify their Supervisor if they are unable to initiate or complete a complaint investigation within the stated time frames. The Specialist will enter a note in the complaint narrative in CCLAS documenting the basis for being overdue.

Any complaint concerning one of the four critical areas of compliance, or any other issue that poses a potential of immediate risk to health and safety, will be initiated by the investigating Specialist by the close of the business day following receipt of the complaint.

Complaint investigations of issues other than one of the four critical areas must be initiated within three business days, and the initiation date and narrative noted in CCLAS within one business day of initiation. Initiation means a site visit or a face to face interview with the child or staff involved. Interim corrective action shall be put in place at this time to reduce the risk of harm children in care.

The investigation must be completed within 30 calendar days. If the complaint involves a serious deficiency, the Specialist will staff with the Supervisor prior to making a determination.

When a complaint is received on a CCDF provider it is handled in the same manner as a non CCDF provider.

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

When a report is received from someone alleging abuse or neglect or a violation of minimum standards or licensing law, Licensing staff investigate to determine the validity of the allegations and to make sure corrective action is implemented.

After any investigation, a written notice is given to the facility and deficiencies are discussed with the person in charge. If a provider disagrees with a finding or deficiency, they may request an administrative review. Licensing staff follows up on all deficiencies to ensure timely correction. If deficiencies are of such a serious nature that the health and safety of the children is threatened, enforcement actions such as program evaluation, corrective action, probation, suspension or revocation of licensure may be warranted.

If a complaint concerning one of the four critical areas (staff child ratio, supervision, behavior guidance, or transportation) is received, the Specialist will immediately review the facility file for any past issues pertinent to the complaint subject matter.

Any complaint concerning one of the four critical areas of compliance, or any other issue that poses a potential of immediate risk to health and safety, will be initiated by the investigating Specialist by the close of the business day following receipt of the complaint.

If, during the response to a complaint, the Specialist learns that more than one incident occurred or more than one child was involved, the situation will be considered one complaint. There will not be an additional complaint entered into the system for each of the other incidents discovered. Those may be handled by citing as deficiencies found during the investigation of the original complaint or as technical assistance with the person in charge of the facility.

Complaint investigations of issues other than one of the four critical areas must be initiated within three business days, and the initiation date and narrative noted in CCLAS within one business day of initiation. Initiation means a site visit or a face to face interview with the child or staff involved. Interim corrective action shall be put in place at this time to reduce the risk of harm children in care.

The Specialist shall notify their Supervisor if they are unable to initiate or complete a complaint investigation within the stated time frames. The Specialist will enter a note in the complaint narrative in CCLAS documenting the basis for being overdue.

Any complaint concerning one of the four critical areas of compliance, or any other issue that poses a potential of immediate risk to health and safety, will be initiated by the investigating Specialist by the close of the business day following receipt of the complaint.

Complaint investigations of issues other than one of the four critical areas must be initiated within three business days, and the initiation date and narrative noted in CCLAS within one business day of initiation. Initiation means a site visit or a face to face interview with the child or staff involved. Interim corrective action shall be put in place at this time to reduce the risk of harm children in care.

The investigation must be completed within 30 calendar days. If the complaint involves a serious deficiency, the Specialist will staff with the Supervisor prior to making a determination.

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

Records of complaints regarding providers are maintained in the CCL Automated Support System (CLASS), the automated system that CCL uses to document all inspections and investigations.

2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:

DCCECE has a public website including a consumer education website where parents and providers can submit complaints and review findings.

Complaints can be submitted by phone, email, or USPS. The general public can go to <https://dhs.arkansas.gov/dccece/cclas/FacilitySearch.aspx> and search for a child care facility and when they pull up that facility they will be able to see all substantiated complaints.

Parents and providers can access substantiated parental/facility complaints through our Search for Licensed Child Care Providers site. This site includes facility visits and regulations

cited along with founded complaints.

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

The Agency's policy and information related to parental complaints can be found by using the following website: <https://humanservices.arkansas.gov/about-dhs/dccece>

2.3 Consumer Education Website

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

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

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

DCCECE created a consumer website that is clear and comprehensive including linkages to the required information, ensuring the information posted is accurate and updated. The division works with the agency's communications division as well as a communications contractor to ensure that language is at the appropriate grade level. The Child Care Facility Search Site provides information about specific child care programs to assist families in making decisions about child care, including information on the programs quality rating level and regulatory visit information. The website is at: <http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>.

DCCECE has two staff who provide outreach to non-English speakers in the Pulaski County and Northwest Arkansas areas of the state. They have developed liaisons with community organizations that serve Hispanics to educate members on child care assistance that might be available as funding permits and to ensure that those currently served are communicated in a culturally-competent manner.

DCCECE plans to work with our contractors, resource and referral agencies and community leaders to provide more resources to the website including more links for parents, providers and the general public.

2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):

All services provided on the consumer website are available to anyone seeking child care assistance. The Division is currently working with communications providers to ensure that information is available to those who speak Spanish.

<http://humanservices.arkansas.gov/about-dhs/dccece/programs>

DCCECE has two staff who provide outreach to non-English speakers in the Pulaski

County and Northwest Arkansas areas of the state. They have developed liaisons with community organizations that serve Hispanics to educate members on child care assistance that might be available as funding permits and to ensure that those currently served are communicated in a culturally-competent manner.

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

All services provided on the consumer website are available to anyone seeking child care assistance. Information on the website is shared with families, providers who may be in need of child care assistance and conforms to those who have disabilities. DCCECE has established partnerships with state and local programs and associations focused on disability-related topics and issues to provide outreach and services to eligible families.

<http://humanservices.arkansas.gov/about-dhs/dccece/programs->

2.3.4 Lead Agency processes related to child care.

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

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

All providers must meet the licensing requirements. The link to licensing requirements can be found at <https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-licensing>

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

All providers must meet the licensing requirements. The link to licensing requirements can be found:

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-licensing>

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

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-licensing>

2.3.5 List of providers

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

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

The list of child care providers can be found at

<http://www.arbetterbeginnings.com/find-child-care>

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

- License-exempt center-based CCDF providers
- License-exempt family child care (FCC) CCDF providers
- License-exempt non-CCDF providers
- Relative CCDF child care providers

Other.

Describe

The search for licensed child care providers offers the following:

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- Open after 7:00 PM
- Open on Weekend
- Voucher Participant
- ABC Facility
- Head Start Facility
- Transportation Provided
- Infant / Toddler - 0 to 36 months*
- Preschool - 30 to 72 months*
- School Age - 60 to 156 months*
- Sick Care - NA*

The results from the search offers the facility name, contact person, site phone, city, zip, and quality rating levels.

c) Identify what informational elements, if any, are available in the searchable results.

Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

Licensed Providers

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

Describe:

The search for child care site also include facility visits and facility complaints. <http://www.arbetterbeginnings.com/find-child-care>

License-Exempt, non-CCDF Providers

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

Describe:

The search for child care site also include facility visits and faility complaints. <http://www.arbetterbeginnings.com/find-child-care>

License-Exempt CCDF Center Based Providers

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

Describe:

The search for child care site also include facility visits and faility complaints. <http://www.arbetterbeginnings.com/find-child-care>

License-Exempt CCDF Family Child Care

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training

- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

The search for child care site also include facility visits and faility complaints. <http://www.arbetterbeginnings.com/find-child-care>

Relative CCDF Providers

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

Describe:

N/A

Other.

Describe:

N/A

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

Other.

Describe:

N/A

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

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable
- Other.

Describe

Arkansas's quality rating improvement system (Better Beginnings) is designed to improve the level of quality in childcare and early childhood education programs across the state. Better Beginnings distinguishes the quality of each Arkansas child care facility by a 1, 2 and 3-star rating system. Better Beginning information can be found at: <http://www.arbetterbeginnings.com>

b) For what types of providers are quality ratings or other indicators of quality available?

Licensed CCDF providers.

Describe the quality information:

Arkansas has in its CCDF Participant Agreement that all licensed CCDF providers must meet a minimum Better Beginnings level (1) QRIS to qualify for voucher reimbursements.

Licensed non-CCDF providers.

Describe the quality information:

Better Beginnings is a voluntary QRIS, all licensed providers are not required to participate. However, if a provider would like to become a CCDF provider participant, they are required to be licensed and participate in QRIS, Better Beginnings.

License-exempt center-based CCDF providers.

Describe the quality information:

Arkansas does not recognize license-exempt center-based CCDF providers. All providers requiring CCDF reimbursements are required to be licensed and participate in QRIS, Better Beginnings.

License-exempt FCC CCDF providers.

Describe the quality information:

Arkansas does not recognize license-exempt providers. All providers requiring CCDF reimbursements are required to be licensed and participate in QRIS, Better Beginnings.

License-exempt non-CCDF providers.

Describe the quality information:

Arkansas does not recognize license-exempt providers. All providers requiring CCDF reimbursements are required to be licensed and participate in QRIS, Better Beginnings.

Relative child care providers.

Describe the quality information:

N/A

Other.

Describe

N/A

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

Certify by responding to the questions below:

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

The Division defines plain language as language the audience can understand the first time they read it.

The Division believes our monitoring reports are all written in plain language. When a provider is cited for a deficiency the regulation text from the Minimum Licensing Requirements is posted on the web site. The Minimum Licensing Requirements are written in plain language. When we promulgate licensing requirements they go through a public hearing phase in which the general public has an opportunity to comment. During that phase if there is difficulty understanding the language we make any necessary changes.

The Arkansas Child Care Information website list information that meets the regulatory and monitoring requirements.

<https://dhs.arkansas.gov/DCCECE/CCLAS/FacilitySearch.aspx>

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

The DCCECE search for child care site gives the consumer information on Facility Visits and Facility Complaints. Consumers will receive information regarding founded complaints along with the citation and the list of licensing Complaint Investigation for each facility.

<https://dhs.arkansas.gov/DCCECE/CCLAS/FacilitySearch.aspx>

If no,

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

N/A

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

Date of inspection

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

Describe how these health and safety violations are prominently displayed.

The deficiencies cited clearly state the rule that was violated. Serious injuries and deaths are also investigated and all associated deficiencies are cited and this information appears on the website.

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

Describe

In some cases the provider is allowed to submit a corrective action plan that details what action will be taken to correct the issue of compliance; however,

for serious health and safety violations the Division can take administrative actions against the program, ranging from a written reprimand, to a license suspension if there is an immediate and present danger to children.

d) The process for correcting inaccuracies in reports.

Any inaccuracies are brought to the attention of the immediate supervisor and it is determined that an inaccuracy has been made, this can generally be corrected within 24 hours of notification.

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

Providers must request to appeal adverse action within 10 days and non-adverse action within 20 days from the date the action was taken. The appealed action would not appear on the public web site until the appeal process has been exhausted.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

To allow providers time to request an appeal, deficiencies are not posted until 60 days after the citations.

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

Reports currently remain on the public website for one year. We are in the process of changing this timeframe to three years.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

- License-exempt non-CCDF providers
- Relative child care providers
- Other.

Describe

Reports are posted on all licensed and registered providers in the state of Arkansas.

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

Certify by providing:

a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

These occurrences must be reported to the Child Care Licensing Unit within one business day and are tracked by the Unit for reporting purposes. There are no exempt providers in Arkansas.

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

Substantiated child abuse is any allegation of suspected child maltreatment that is investigated and found to be true by the Division of Children and Family Services, or the Arkansas State Police Crimes Against Children Division, the entities charged with making this determination.

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

Serious injuries are defined as any injuries that require medical attention.

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

The information on the consumer education website provides the overall numbers of child deaths, serious injuries, and substantiated cases of child abuse that are reported to the Division of Child Care and Early Childhood Education. The Division does not recognize license exempt providers.

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

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

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information:

Contact information for the assigned Licensing Specialist is included on the information obtained when reviewing facility information on the website. Families can contact DCCECE at

1-800-445-3316 or use the link below:

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

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

<http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

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

N/A

2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

DCCECE's Family Support Specialists as well as other staff in DCCECE including Licensing, Arkansas Better Chance (state's PreK program), Health and Nutrition Programs work together to ensure that families understand the availability of child care assistance programs. If CCDF assistance is unavailable, staff work together to ensure that eligible clients are served through Early Head Start, Head Start, or the state's PreK program, where appropriate. Applications for child care assistance and materials on how to choose a child care provider are available online at <https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-assistance#assistance> and shared with parents in face-to-face meetings and on the consumer education website at <https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education> . Information can be emailed directly to families to inform them about child care assistance.

In addition, the Division communicates by telephone and in person to families across the state with information about financial assistance through its Resource and Referral Agencies. They share all types of information, including information about the Child Care Subsidy program, WIC, SNAP, Energy Assistance, and other programs based on family needs.

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

Since many of the programs are under the auspices of the Division of Child Care and Early Childhood Education (DCCECE), staff work with providers at the local level to inform families of child care assistance that might be available. In addition, the Family Engagement team and other staff work with providers, Resource and Referral agencies, and other divisions in the Department of Human Services (DHS) including the Division of Children and Family Services and Division of Developmental Disabilities to ensure that staff, providers, and families are aware of assistance available. DCCECE staff also work with other agencies such as the Division of

Workforce Services, Arkansas Department of Education, etc. to inform families of available child care services.

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

Temporary Assistance for Needy Families program:

The Division of Child Care and Early Childhood Education (DCCECE) works closely with our TANF agency, the Department of Workforce Services (DWS) to provide information to parents, providers and the general public through DCCECE's website at <https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-assistance#assistance> and through DWS's website at <https://www.dws.arkansas.gov/temporary-assistance-for-needy-families/> . DCCECE caseworkers are responsible for keying in authorizations for TANF families.

Head Start and Early Head Start programs:

The Division of Child Care and Early Childhood Education (DCCECE) works closely with our Head Start Collaboration Office and Head Start Agencies across the state. A representative from our Head Start Collaboration office sits on our State Advisory Council. Further, DCCECE caseworkers works with parents and head start programs to place eligible children into their programs. Information is usually provided during face to face interviews by DCCECE staff.

Low Income Home Energy Assistance Program (LIHEAP):

N/A

Supplemental Nutrition Assistance Programs (SNAP) Program:

N/A

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

N/A

Child and Adult Care Food Program(CACFP):

N/A

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

N/A

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

N/A

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

When families are requesting child care assistance, Family Support Specialists review with them the availability of programs to meet their needs and make appropriate referrals as necessary. The Division of Child Care Care and Early Childhood Education (DCCECE) also works directly with providers by providing information during trainings and sends critical information by email that can be shared with families on best practices, child development, etc. DCCECE will also implement a requirement whereby parents must complete a parent education activity during their 12 month eligibility period.

DCCECE contracted training addresses the need of strong family engagement through provider training. The training is based on the philosophy of helping child

care providers promote positive parenting and healthy social-emotional development in children by implementing protective factors into early childhood programs. Partnerships exist which assist high voucher use programs in learning strategies to conduct effective family meetings while providing several scientifically based resources for instruction on parenting.

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

Information is available on the Division of Child Care and Early Childhood Education (DCCECE) website regarding social/emotional development and behavior issues. If a provider is experiencing problems with behavioral issues, referrals can be made to DCCECE's BehaviorHelp Support system to provide education and training as well as mental health consultation services, where appropriate. Information can be found at the following link <http://humanservices.arkansas.gov/about-dhs/dccece>. In addition, information and resources on the prevention of expulsion and suspension can be found at: <http://humanservices.arkansas.gov/about-dhs/dccece/programs-services/child-care-assistance>.

DCCECE has adopted the Center on the Social and Emotional Foundations for Early Learning Pyramid Model which is focused on promoting the social emotional development and school readiness of young children birth to age 5. DCCECE contracted training has been developed to aid providers with implementing the model. Through our contractors, DCCECE offers training such as: TIPS, Naptime Academy, Pre-K SEL, Strengthening Families and the Caring Conversations Cafés – building strong Parent Provider partnerships.

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

The Division of Child Care and Early Childhood Education (DCCECE) aligned CCDF policies with the state's PreK policies on the prevention of suspension and expulsion. A response system called BehaviorHelp was implemented July 1, 2016 to support provider requests for assistance with behavioral issues when they arose. Professional development contractors have been used to support training, education, coaching, as well as mental health consultation services. Information has been shared with families, providers, inter and intra-agency partners through various presentations at meetings, Family Engagement team's work at the local level with providers, as well as through DCCECE staff working with providers.

2.5 Procedures for Providing Information on Developmental Screenings

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

2.5.1 Certify by describing:

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

Division staff in the Family Support Unit routinely access a variety of community and other resources using <https://argis.ualr.edu/aecamrg/search.php> to share with families, providers and the general public. Staff review with families when they apply for child care assistance to work with providers, local physicians or the Arkansas Department of Health to ensure that developmental screenings take place.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

The Division has placed developmental screening links to its consumer education website and our Family Support Specialist works with CCDF voucher recipients during face-to-face interviews to provide information about EPSDT.

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

DCCECE Family Support staff are required to ensure that parents qualifying for a subsidy receive information on developmental screenings as part of the intake process.

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

Information on how to access available resources and services to obtain developmental screenings is available on the DCCECE consumer education website, as well as in the information provided to CCDF families at time of intake.

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

Training and professional development trainings are made available through our contractors. A list of trainings for all providers can be found on our Professional Development Registry (PDR).

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

N/A

2.6 Consumer Statement for Parents Receiving CCDF Funds

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

2.6.1 Certify by describing:

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

Parents receiving CCDF funds will be directed to the DHS consumer education site to receive information that contains specific information about the child care provider they select. This information about the child care provider selected by the

parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider.

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

The Consumer Statement contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider.

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

<https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

3 Provide Stable Child Care Financial Assistance to Families

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

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

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility criteria based on a child's age

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

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

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

No

Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: A child who has a physical or mental condition which substantially limits one or more major life activities, who has a record of such an impairment, or who is regarded as having such an impairment, or and has been diagnosed by a licensed medical or psychological practitioner

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

No.

Yes

and the upper age is 18

(may not equal or exceed age 19)

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

"residing with":

Living with or in a household with a parent or legal guardian or other individual standing in loco parentis.

"in loco parentis":

"In place of a parent." A foster parent, a county custodial agency or a boarding school which is assuming the parental obligations for the minor, including protecting his/her rights, may be referred to as being in loco parentis. In loco parentis infers that the person or entity is standing in the role of the parent of a minor, without having gone through the formal adoption process.

3.1.2 Eligibility criteria based on reason for care

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

"Working":

Working is defined as : To do work, to be employed and receive payment for the work either in cash or in-kind, seeking or obtaining employment, making

contact with potential employers, apply for vacancies, and interviewing for jobs. Arkansas is continuously monitoring work hour requirements and places a priority on applicants meeting thirty (30) or more work hours with consideration given to those working a minimum of twenty-five (25) hours based upon availability of funds.

"Job training":

Job Training is defined as: Any activity that builds or enhances upon job skills that lead to further employability skills.

"Education":

Education is defined as: A minimum of part-time attendance of a college, university, technical institute, and training program.

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

Attending Job training- Any activity that builds or enhances upon job skills that lead to further employability skills. (a minimum of 30 hours weekly)

Education- A minimum of part-time attendance of a college, university, technical institute, and training program. (11 or less hours)

Travel time is allowed from the child care setting to the approved activity and back. (an hour of drive time)

3.1.2 Eligibility criteria based on reason for care

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

No.

If no, describe the additional work requirements:

Yes.

If yes, describe the policy or procedure:

In a two-parent or custodian household, both parents must be enrolled and attending an educational institute full-time or may combine employment, education or job skills training equal to thirty (30) hours per week.

- Students enrolled in institutions of higher learning (post-secondary education) must be considered a full-time student with a minimum of twelve (12) semester hours or nine (9) quarter hours to receive assistance.

1. Students must provide a class schedule or a copy of their transcript.
2. Family Support Specialist shall collect proof of enrollment in high school, GED, or higher education for each new period (quarter, semester, term, etc.) and the most current grade report.

- Students enrolled in graduate school must be enrolled in at least six (6) semester hours per term.

- Students pursuing a degree that requires clinical, practicum or an internship may provide supporting documentation in the form of a written statement from advisor or institution.

1. Only applies to classes that have long hours or rotating shifts that would hinder the student from obtaining employment or taking other classes

Students enrolled in GED classes must show the following documents of proof including but not limited to:

- Verification of full-time enrollment or,
- Written statement from advisor or institution on official letterhead

For the summer break, students have the following options based on summer plans:

- Eligible Activity
- Job Search
- Inactive Status
- Administrative Approval

3.1.2 Eligibility criteria based on reason for care

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

months of job search)

No.

Yes.

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

N/A

3.1.2 Eligibility criteria based on reason for care

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

No.

Yes. If yes:

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

Protective Services is described as providing services by DCFS to a family to prevent further abuse or neglect and to strengthen family functioning and overall well-being of children. If the Lead Agency deems that the child is in danger of being institutionalized or at-risk, they will be considered eligible for care.

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

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

No

Yes

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

No

Yes

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

No

Yes

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

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

Income can be classified as earned or unearned. The family is required to report all income at the time of application, including any income that is anticipated to be regularly received during the certification period. All earned and unearned income of each household member is counted unless specifically excluded in policy.

b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$2658.46	\$2259.69	N/A	N/A
2	\$3476.44	\$2954.98	N/A	N/A
3	\$4294.43	\$3650.27	N/A	N/A
4	\$5112.42	\$4345.55	N/A	N/A
5	\$5930.40	\$5040.84	N/A	N/A

c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])(98.16(i)(3)).

Income eligibility limits are statewide.

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

d) SMI source and year. <https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03>

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

The chart represents SMI guidelines based on the most recent Bureau Census and is not identified by the most populous area of the state.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 10/01/2017

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

http://humanservices.arkansas.gov/images/uploads/dccece/Sliding_Fee_Scale_v2018.pdf

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

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

Families declaring assets in excess of \$1,000,000 are ineligible for Subsidized Child Care Assistance. At the time of initial application and redetermination, families will be asked to decalre if they have assits in excess of \$1,000,000.

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

No.

Yes.

If yes, describe the policy or procedure and provide citation:

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

EARLY HEADSTART- Child Care Partnership

- Only one of the child's parents/legal guardians is required to meet CCDF eligibility. If both parents/legal guardians are employed and live in the same household
- Parents receiving subsidy must meet EHS eligibility requirements
- Parents do not have to work a minimum number of hours, Parents only have to be working or going school to qualify for the assistance
- The CCDF voucher can only be used for the Early Headstart partnership program.
- Eligibility is not redetermined and is good through the duration in the Early HeadStart program.

FEDERAL PRE-K GUIDELINES

- An eligible child shall remain eligible for two (2) school years following the first date of authorization pending the availability of funding
- In a two (2) parent household, only one parent must meet eligibility requirements and that parent or guardian must either be:
 1. Working thirty (30) hours per week at (AR) minimum wage or higher (gross earnings will be used along with any overtime and bonuses if they appear on at least of the paystubs provided) or,
 2. A full time student enrolled in twelve (12) credit hours or,
 3. Combine work and school to equal thirty (30) hours per week
 4. Parent/guardian enrolled in less than six (6) credit hours per session must work a minimum of twenty (20) hours per week
- A family who falls into one of the following categories shall be exempt from income requirements only if the family is work/school ineligible:
 1. Foster child
 2. Child with an incarcerated parent
 3. Child in the custody of or living with a family member other than the mother or father
 4. Child with an immediate family member arrested for or convicted of drug- related offenses
 5. Child with a parent activated for overseas military duty

HOMELESS – children or youth who lack a fixed, regular, and adequate night time residence including: sharing housing with others, living in motels, hotels, trailer parts, or camping grounds, living in emergency or transitional shelters, or living in a public or private place not designed for humans to live.

- Homeless families do not have to meet the same income and work eligibility requirements as other families.
- Only a child care assistance application is needed to authorize care, FSS will work with families through casemanagement practices to get the additional eligibility requirements.

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

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

Describe:

CCDF families with children with special needs are required to submit an Individual Education Plan (IEP) and must provide medical documentation indicating the special needs level of care. Applicant may receive child care services for all children in the household (pending the availability of funds). Children with special needs are also authorized at a higher reimbursement rates based on their special needs level.

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

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

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

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

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

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

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

Describe the policies and procedures.

If a family is found ineligible due to household income exceeding eighty-five percent (85%) State Median Income limit during redetermination, the family shall be given a Pending Closure Notice that their assistance shall be discontinued at the end of ten (10) calendar days or the authorization period, whichever comes first. The Division does not have a second tier of eligibility.

Provide the citation for this policy or procedure.

If a family is found ineligible due to household income exceeding eighty-five percent (85%) State Median Income limit during redetermination, the family shall be given a Pending Closure Notice that assistance shall be discontinued at the end of ten (10) calendar days or the authorization period, whichever comes first.

Arkansas CCDF Procedure Manual 5.1.3.3

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

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

N/A

Describe how the second eligibility threshold:

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

N/A

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

N/A

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

N/A

- iv. Provide the citation for this policy or procedure:

N/A

- Other.

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

N/A

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

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? *(Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.)*

No.

Yes.

Describe:

3.1.8 Fluctuation in earnings.

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

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

Describe:

Fluctuating income is defined as income that varies from week to week. Some caseheads, eligible household members, or applicants may have irregular earnings over the course of a year, including earnings that temporarily exceed eighty-five percent (85%) of the State Median Income. In order to calculate fluctuating income, verification of income shall reflect up to forty-five (45) days.

Accepted Documents of Proof:

- Copies of consecutive check stubs received in the past forty-five (45) days
- Contract Agreement - A copy of the current contract between employee and employer

- Payroll statement
- DCC Verification of Employment (VOE) form - must be completed by employer and information must reflect a minimum of thirty (30) days and maximum of forty-five (45) days.
- DCO-97 Verifications of Earnings form - must be completed by employer and information must reflect a minimum of thirty (30) days and maximum of forty-five (45) days. Requirements:
 - Only applies to continuous employment with current employer(s)
 - Regardless of the number of employers, all income shall be averaged together.
 - Does not apply to a non-temporary raise in hourly pay or salary with current employer
 - Does not apply to self-employment

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

Describe:

In order to calculate fluctuating income, verification of income shall reflect up to forty-five (45) days.

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

Describe:

The policy does take into account families with irregular increases in wages.

The policy does not apply to a non-temporary raise in hourly pay or salary with current employer.

Other.

Describe:

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

required and how often. Check all that apply.

Applicant identity.

Describe:

This information is maintained in the Kidcare data system. The Social Security Number for the child, parent identification, driver's license, birth certificate for the child, court records are collected as documentation. This documentation is only required at initial application. Birth certificates would be requested outside of the initial application when adding additional child(ren) requiring child care assistance.

Applicant's relationship to the child.

Describe:

DCCECE verifies the applicant's relationship to the child using birth certificates, other DHS shared data, and other legal documentation. This information is maintained in our Kidcare data system. This documentation is only required at initial application and when adding additional child(ren) requiring child care assistance.

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

Describe:

Eligibility for the child is determined by validating age through birth certificates, and other DHS shared data systems. This information is maintained in our Kidcare data system. This documentation is only required at initial application.

Work.

Describe:

Information is collected at initial and continued determinations. Parents must provide check stubs, verification of employment form and/or income tax statements. Continued redeterminations are conducted according to the QRIS level of the child care provider. All redeterminations for QRIS levels 1 and 2 are once per year. All redeterminations for QRIS level 3 are once every two years. Redetermination outside of the stated QRIS level will only be conducted according to if the family reports a cessation from work for school activities or income over 85% of SMI.

[Job training or educational program.](#)

[Describe:](#)

Educational schedule or verification of earnings form. This information is maintained in our KidCare data system. Continued redeterminations are conducted according the the QRIS level of the child care provider. All redeterminations for QRIS levels 1 and 2 are once per year. All redeterminations for QRIS level 3 are once every two years. Redetermination outside of the stated QRIS level will only be conducted according if the family reports a cessation from work for school activities or income over 85% of SMI.

[Family income.](#)

[Describe:](#)

Check stubs, Verification of Earnings form, and W-9 income tax statements are required. This information is maintained in our KidCare data system. Continued redeterminations are conducted according the the QRIS level of the child care provider. All redeterminations for QRIS levels 1 and 2 are once per year. All redeterminations for QRIS level 3 are once every two years. Redetermination outside of the stated QRIS level will only be conducted according if the family reports a cessation from work for school activities or income over 85% of SMI.

[Household composition.](#)

[Describe:](#)

State or other Governmental systems shall be used to identify and verify household structure for every eligible application. This information is maintained in our KidCare data system. This documentation is only required at initial application, when adding additional child(ren) requiring child care assistance or at redetermination

[Applicant residence.](#)

[Describe:](#)

Parents may submit a current apartment lease contract, bills, and driver's license that has the same address as the physical address on the Child Care Subsidy application. This information is maintained in our KidCare data system.

This documentation is only required at initial application and updated at redetermination.

Other.

Describe:

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

Time limit for making eligibility determinations

Describe length of time:

The Family Support Unit has a maximum of ten (10) business days from the date the application is received by the Program Eligibility Specialist. The application shall be waitlisted, pending, approved or denied.

Waitlisted- Due to limited funding, eligible applicants are placed on a waiting list for child care assistance.

Pending- DCCECE is waiting on required information to determine eligibility.

Approved- Applicant is determined eligible and removed from the waitlist, pending availability of funds.

Denied- Applicant is determined ineligible because they don't meet eligibility requirements or fail to provide required documentation to determine eligibility

Track and monitor the eligibility determination process

Other.

Describe:

None

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

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

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

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

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

a) Identify the TANF agency that established these criteria or definitions: Department of Workforce Services

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

"Appropriate child care":

Child care that meets the minimum health and safety standards and guidelines established by DCCECE Licensing Rules and Regulations. All care must be provided in a center or licensed or registered child care family home.

"Reasonable distance":

The travel time from the parents' home to his or her place of employment must not exceed more than one (1) hour one way, in order to be required to place a child in childcare.

"Unsuitability of informal child care":

Care which does not meet the developmental needs of the child or care that has

been determined not to be in the best interest of the child or parent.

"Affordable child care arrangements":

Care provided at no charge to the family for the first year after the family's TANF case closes due to employment assures affordable care. The sliding fee scale is applied after the first year.

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

In writing

Verbally

Other.

Describe:

Clients are advised of TANF work requirements and penalties for non-compliance in a variety of formats including written and verbal. They receive information at the initial interview, when meeting with their TANF caseworker. Clients are advised of the requirements, including any exceptions they may meet.

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

Arkansas TANF procedure manual

3.2 Increasing Access for Vulnerable Children and Families

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

Note:

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

3.2.1 Describe how the Lead Agency defines:

a) "Children with special needs":

The classification given to a child who requires child care because of a condition documented by a physician, a licensed psychologist or a court order.

b) "Families with very low incomes":

Children whose family income falls below the federal poverty level. Eligibility determination is based on Arkansas' sliding fee scale @85% of SMI. Families with very low income could receive free child care assistance with no co-payment if their income is at or below the federal poverty level. Prioritization for child care assistance are given to TANF, children in foster care, children with disabilities, teen parents, grandparents, and homeless families. Applicable waivers are given to this priority population with very low incomes at or below the federal poverty level.

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

a) Identify how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

This group is given priority over other CCDF-eligible families. DCCECE reimburses at higher rates for providers caring for children with special

needs who require additional care. In instances where there are no funding limitations, families will be waived from waiting lists and co-payments.

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

Prioritization for child care assistance are given to TANF, children in foster care, children with disabilities, teen parents, grandparents, and homeless families. Applicable waivers are given to this priority population with very low incomes at or below the federal poverty level.

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

This group is given priority over other CCDF-eligible families. Program Eligibility Specialist provides community outreach efforts to homeless shelters across the state and partnerships are established. Staff are assigned to various homeless shelters in various areas of the state to ensure access to services.

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

When a TEA case closes due to employment, services can be extended through Extended Support Services (ESS). The first twelve (12) months is provided at no cost to the client. There is a minimal twenty (20) hour work requirement. After their twelve (12) months of childcare has been exhausted, the ESS recipients' case will be re-evaluated by the caseworker and eligibility will be established using the low-income eligibility standards. TEA and ESS each have a twenty-four (24) month lifetime limit.

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

Teen Parent Education:

- 1. For children whose parents are twenty (20) years or younger and completing their GED or high school diploma.**
- 2. Applicant must provide enrollment form from school or GED program, class schedule, transcript, or letter from advisor/counselor.**
- 3. Applicant must provide most current grades or progress report.**
- 4. All Teen Parent cases must be entered into KidCare as the casehead.**
- 5. Teens under age eighteen (18) shall not be interviewed without the parent/custodian present or a signed consent from the parent or care taker.**

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

Children in, or transitioning out of foster care and children with an open DCFS protective services case:

The applicant must provide a letter from the DCFS case worker or a court order.

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

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

Eligibility requirements are waived for children who are homeless and those who are in foster care. The Family Support Specialist provides case management services to obtain the information to establish eligibility.

b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- Lead Agency accepts applications at local community-based locations
- Partnerships with community-based organizations
- Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care

Other
Family Support Specialist provides community outreach efforts to homeless shelters across the state and partnerships are established. Staff are assigned to various homeless shelters in various areas of the state to ensure access to services.

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

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

Note:

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

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

The CCDF Program Eligibility Specialists allows 10 to 15 business days for families to schedule a Health and Wellness visit and works with the family to get all necessary documents to complete the eligibility requirements including pulling information from integrated systems.

Provide the citation for this policy and procedure.

Arkansas CCDF Procedure Manual Section 3.2.3

Children who are in foster care.

Foster Care eligibility is established through the DCFS. A referral is sent to DCCECE to further process the child care assistance application using CCDF funds. Authorizations for childcare assistance is imminent for Homeless Children and Families. The CCDF Program Eligibility Specialists allows 10 to 15 business days for families to schedule a Health and Wellness visit and works

with the family to get all necessary documents to complete the eligibility requirements including pulling information from integrated systems

Provide the citation for this policy and procedure.

Section 3.2.3

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

DHS Family Support Unit works with CCDF families and local agencies to help support families schedule their child's EPSDT screening during initial eligibility. Families are required to schedule an appointment for their child's screening.

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

No.

Yes.

Describe:

The CCDF Program Eligibility Specialists allows 10 to 15 business days for families to schedule a Health and Wellness visit and works with the family to get all necessary documents to complete the eligibility requirements including pulling information from integrated systems

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

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

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

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

A minimum of twelve (12) months of care will be authorized (pending the availability of funds) once a case head has been deemed eligible, unless the case head's income exceeds eighty-five (85%) of the State Median Income during the authorization period.

DCCECE may discontinue assistance prior to the end of the authorization period only in the following limited circumstances:

- **Excessive unexplained absences (after attempts to contact family)**
- **A change in residency outside of the state**
- **Substantiated fraud or an Intentional Program Violation**
- **Household income exceeds eighty-five percent (85%) State Median Income Limit**

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

"Temporary change" is defined as any time-limited absence from work for an employed parent due to reasons such as need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working between regular industry work seasons; any student holiday or break for a parent participating in training or education; any reduction in work, training or education hours, as long as the parent is still

working or attending training or education; any other cessation of work or attendance at a training or education program that does not exceed three months or a longer period of time; any change in age, including turning 13 years old during the eligibility period; and any change in residency within the State.

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

CCDF Procedure Manual - Job Search: section 3.1.7

https://humanservices.arkansas.gov/images/uploads/dccece/FSU_Procedure_Manual_Rev_1.23.2015.pdf

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

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

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

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

- No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

- Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
- i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

Parents with a non-temporary loss of work or cessation of eligible activity will continue to receive child care vouchers for three (3) months. If the parent becomes re- engaged, care will continue for the established determination period

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

The job search period is triggered based on:

- Parent self-report of cessation of employment, education, or job skills training program
- Summer break (for students)

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

90 Days

iv. Provide the citation for this policy or procedure.

Arkansas CCDF Procedure Manual Section - Job Search: section 3.1.7

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



Not applicable.



Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

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

Excessive unexplained absences (after attempts to contact family)

·DHS recognizes that a casehead's child may be temporarily absent from the faci

because of illness or some reason connected with the plan of service. The intent of the absentee billing policy is to avoid penalizing either the casehead or the Participant by not allowing reimbursement for the child's temporary absence. The facility must be open and the billed services available before billing for a temporarily absent child is allowable.

·The maximum billable absentee days per trimester are as follows:

Trimester Days Allowed Not to Exceed

July - October 12* 6 in a given month**

November- February 16* 8 in a given month**

March - June 12* 6 in a given month**

*Days will be pro-rated on the start date of the authorization.

** The Participant reserves the right to charge the client for absentee days that exceed the above limits.

ii. Provide the citation for this policy or procedure:

Arkansas CCDF Procedure Manual- Section III DHS Responsibilities and Assurances, H #2

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

Provide the citation for this policy or procedure:

Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

Providing false information or withholding information may result in denial or termination of child care assistance. Arkansas CCDF Procedure Manual and Parents Rights and Responsibilities on the CCDF Application

3.3.3 Change reporting during the 12-month eligibility period.

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

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

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

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

No

Yes

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

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

Additional changes that may impact a family's eligibility during the 12-month period.

Describe:

Failure to report a cessation in employment, student status, or job skills training program within 90 calendar days, excessive unexplained absences, change in residency outside of the state, substantiated fraud or intentional program violation, household income that exceeds 85% percent of the SMI,

household composition that increase household income over 85% SMI, family chooses to end services, family has reached their sixty (60) month lifetime limit. (see lifetime limit exemption)



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

Describe:

Change in family's address, email and/or phone number without notifying Lead Agency.



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

Describe:

DHS notifies parents and child care providers if there is a reduction in services to the client and if there is an extended problem that affects payment processing through its billing site.

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

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



Phone



Email



Online forms



Extended submission hours



Postal Mail



FAX



In-person submission



Other.

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis

during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

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

Address, Email, Phone number, change of CCDF Program Participant, Household composition that increase household SMI over 85%, reduction in work employment, student status, or job skills training program, income so long as it does not exceed 85% SMI.

ii. Provide the citation for this policy or procedure.

Arkansas CCDF Procedure Manual Section

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

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

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

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the

state/territory's or designated local entity's requirements for the redetermination of eligibility.

- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations
- Extended office hours (evenings and/or weekends)
- Other.

Describe:

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

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

Describe:

3.4 Family Contribution to Payments

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

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

3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	1063.39	29.61	2.7%	2259.69	29.61	1.3%
2	1390.59	29.61	2.1%	2954.98	29.61	1.0%
3	1717.78	29.61	1.7%	3650.27	29.61	0.8%
4	2044.98	29.61	1.4%	4345.55	29.61	0.6%
5	2372.17	29.61	1.2%	5040.84	29.61	0.5%

b) What is the effective date of the sliding-fee scale(s)? 02/01/2018

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

Pulaski county Urban

Better Beginnings Level 1

Preschool age child

21 days in a month

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

https://humanservices.arkansas.gov/images/uploads/dccece/Sliding_Fee_Scale_v2018.pdf

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

NA

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

Check all that apply.

The fee is a dollar amount and:

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

Describe:

Other.

Describe:

The copay is a percentage of the facility's rate. Families choosing a Better Beginnings Level 1 facility have a 6% copay per child. Families choosing a Better Beginnings Level 2 facility have a 4% copay per child. Families choosing a Better Beginnings Level 3 facility have a 2% copay per child. The percentages are based off of the facility's rate.

The fee is a percent of income and:

- The fee is per child, with the same percentage applied for each child.
- The fee is per child, and a discounted percentage is applied for two or more children.
- The fee is per child up to a maximum per family.
- No additional percentage is charged after certain number of children.

- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

- Other.

Describe:

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

- No.
- Yes, check and describe those additional factors below.

- Number of hours the child is in care.

Describe:

The copay is a percentage of the facility's rate. Families choosing a Better Beginnings Level 1 facility have a 6% copay per child. Families choosing a Better Beginnings Level 2 facility have a 4% copay per child. Families choosing a Better Beginnings Level 3 facility have a 2% copay per child.

- Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

Better Beginnings Level 1 facilities - copay of 6% of the facility's rate
Better Beginnings Level 2 facilities - copay of 4% of the facility's rate
Better Beginnings Level 3 facilities - copay of 2% of the facility's rate

- Other.

Describe:

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

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

Copays are not charged for children in foster care or protective services. CCDF Manual Section 3.4.4

- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

Copays are not charged for children in foster care or protective services. CCDF Manual Section 3.4.4

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

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

to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

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

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

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).

Each eligible family receives a voucher authorization immediately once eligibility is determined. A system notice and an Authorization Worksheet is generated that provides information about their choice of providers, service authorization days, parent fees, service type, authorization start and end date, care type, and absentee billing trimester totals per child. All CCDF authorizations will be authorized pending the availability of funds, if CCDF funds are available.

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

Check all that apply.

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

Describe:

4.1.3 Child care services available through grants or contracts.

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

- No. If no, skip to 4.1.4.
- Yes, in some jurisdictions but not statewide.

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

- Yes, statewide. If yes, describe:

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

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

iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

iv. The process for accessing grants or contracts:

v. How rates for contracted slots are set through grants and contracts:

vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

vii. If contracts are offered statewide and/or locally:

4.1.3 Child care services available through grants or contracts.

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

- Programs to serve children with disabilities
 - Programs to serve infants and toddlers
 - Programs to serve school-age children
 - Programs to serve children needing non-traditional hour care
 - Programs to serve children experiencing homelessness
 - Programs to serve children in underserved areas
 - Programs that serve children with diverse linguistic or cultural backgrounds
 - Programs that serve specific geographic areas
 - Urban
 - Rural
 - Other
- Describe
- N/A

4.1.3 Child care services available through grants or contracts.

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

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

Describe

N/A

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

Child care providers must sign the CCDF Participant Agreement which specifies that all CCDF licensed facilities must be accessible during the facility's hours of operation to a parent of a child who is receiving care at the facility.

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

No.

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

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

Describe:

N/A

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

Describe:

N/A

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

Describe:

N/A

Restricted to care by relatives.

Describe:

Relatives are expected to satisfy the same requirements as other providers.

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

Describe:

N/A

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

Describe:

These providers must be a Registered Child Care Family Home provider and meet similar standards that licensed homes are required to meet.

Other.

Describe:

N/A

4.2 Assessing Market Rates and Child Care Costs

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

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

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

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

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

- MRS
- Alternative methodology.

Describe:

DCCECE contracted with the UAMS evaluation team to develop cost models for multiple child care submarkets in 2013 and 2014. These cost models were used to inform DCCECE on the rate structure for tiered reimbursement. In 2014-2015, DCCECE implemented an urban/rural geographic distinction for CCDF reimbursement. Counties within metro areas with populations under 250,000 (continuum codes 1, 2, or 3) were classified as urban based on the 2013 Rural-Urban Continuum Codes from the US Department of Agriculture's Economic Research Service ("USDA Economic Research Service - Rural-Urban Continuum Codes," 2013). Although this method for population sampling is simple to understand and implement, market price study recommendations (Grobe, Weber, Davis, Kreader, & Pratt, 2008) note that there are limitations of using this classification (i.e., clusters are likely to contain more than one market within a geographic unit and not based on empirical evidence of price differences). A market price and cost modeling study was conducted using a priori rural-urban

distinctions.

For the market price and cost modeling study, the UAMS evaluation team was provided data from DCCECE on all licensed facilities (including the type of program and number of children licensed to serve by child age), market prices, CCDF children by age and facility, state-funded program (e.g., Arkansas Better Chance for School Success, High Quality Preschool Program, etc.) children by age and facility. Further, data were attained from the Head Start collaboration office on the number of children in Early Head Start and Head Start by facility. This permitted the calculation of an adjusted number of private pay slots for each facility by each childcare submarket (e.g., child age, type of care, and location).

Alternative methodology.The UAMS evaluation team developed cost models for multiple child care submarkets in 2013 and 2014. These cost models were used to inform DCCECE on the rate structure for tiered reimbursement. The Market Price Study will inform DCCECE about the implemented rate structure. AR will be reviewing and adjusting rates during this Plan period.

Both.

Describe:

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

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

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

Changes to the market rates were presented to the Arkansas Early Childhood Commission prior to implementation

b) Local child care program administrators:

Changes to the market rates were presented to the Arkansas Early Childhood Commission prior to implementation where local child care program administrators are in attendance.

c) Local child care resource and referral agencies:

Local child care resource and referral agencies works with the division when establishing market rates.

d) Organizations representing caregivers, teachers, and directors:

Changes to the market rates were presented to the Arkansas Early Childhood Commission prior to implementation where organizations representing caregivers, teachers, and directors are in attendance.

e) Other. Describe:

N/A

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods.

For the market price and cost modeling study, the UAMS evaluation team was provided data from DCCECE on all licensed facilities (including the type of program and number of children licensed to serve by child age), market prices, CCDF children by age and facility, state-funded program (e.g., Arkansas Better Chance for School Success, High Quality Preschool Program, etc.) children by age and facility. Further, data were attained from the Head Start collaboration office on the number of children in Early Head Start and Head Start by facility. This permitted the calculation of an adjusted number of private pay slots for each facility by each childcare submarket (e.g., child age, type of care, and location).

Market price data are collected by DCCECE as administrative data as per day prices across multiple statuses (e.g., full-time, part-time, night and weekend care). Private tuition prices are provided at the initiation of licensing and are updated by licensing and child care development fund (CCDF) staff in the 1st trimester of each year. In addition to the use of prices for this and ongoing studies of private tuition rates, rates provided to DCCECE are published in the child care search engine for parents. Therefore, there is incentive for programs to reflect their current rates.

In 2014-2015, DCCECE implemented an urban/rural geographic distinction for CCDF reimbursement. Counties with in metro areas with populations under 250,000 (continuum codes 1, 2, or 3) were classified as urban based on the 2013 Rural-Urban Continuum Codes from the US Department of Agriculture's Economic Research Service ("USDA Economic Research Service - Rural-Urban Continuum Codes," 2013). Although this method for population sampling is simple to understand and implement, market price study recommendations (Grobe, Weber, Davis, Kreader, & Pratt, 2008) note that there are limitations of using this classification (i.e., clusters are likely to contain more than one market within a geographic unit and not based on empirical evidence of price differences). This market price and cost modeling study will conduct analyses using a priori rural-urban distinctions. It will also examine whether there is empirical evidence of price differences across the regions.

The UAMS team conducted a two-step cluster analysis for each age group (IBM, 2001). Cluster membership was determined based on the Schwarz's Bayesian Criterion or BIC. Analyses for all age groups include programs for which the number of children estimated as private pay was at least one. Further, for preschool and school age programs, year-round operation was required to be included in cluster analyses. The sample of summer only school age programs was too small to include. Goodness of fit of cluster results are reported using the average silhouette, a measure of cohesion and separation of cluster. The higher the average silhouette, the better the model fits the data. Further, an average silhouette of .5 or greater represents a reasonable data structure.

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

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

In 2014-2015, DCCECE implemented an urban/rural geographic distinction for CCDF reimbursement. Counties within metro areas with populations under 250,000 (continuum codes 1, 2, or 3) were classified as urban based on the 2013 Rural-Urban Continuum Codes from the US Department of Agriculture's Economic Research Service ("USDA Economic Research Service - Rural-Urban Continuum Codes," 2013). Although this method for population sampling is simple to understand and implement, market price study recommendations (Grobe, Weber, Davis, Kreader, & Pratt, 2008) note that there are limitations of using this classification (i.e., clusters are likely to contain more than one market within a geographic unit and not based on empirical evidence of price differences). This market price and cost modeling study will conduct analyses using a priori rural-urban distinctions.

We provide full-time pricing data by age groups, however the response rates for summer only school-age programs are too small to conduct analyses. We also provide rates by provider type and geographic location as described in the geographic section below. Further, while recommendations (Branscome, 2015; Grobe et al., 2008) suggest treating large family child care homes as a separate type of care, the samples of FCCH programs in Arkansas is relatively small (N=407). The UAMS evaluation team examined the average pricing of small and large FCCH providers and there were no statistically significant differences in prices across age group by geographic region. Therefore, small and large FCCH providers are combined for reporting.

The price per child care slots was calculated by weighting the reported prices by total private-pay capacity, calculated as defined above. The purpose of calculating the price per private pay child care slot was to represent the actual prices available to consumers in the community.

b) Type of provider. Describe:

There are no differences in rates based on provider type.

c) Age of child. Describe:

Multipliers

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

N/A

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

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

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 03/23/2016

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 03/23/2016

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

2015/2016

<http://humanservices.arkansas.gov/dccece/Pages/ChildCareAssistance.aspx>

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

DCCECE evaluated this data and used a base rate with a combination of multipliers to determine final reimbursement amounts.

4.3 Setting Payment Rates

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

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

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

Rate \$ 32.84 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 80

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

Rate \$ 32.84 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 98

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

Rate \$ 30.67 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 87

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

Rate \$ 30.67 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 98

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

Rate \$ 27.14 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 83

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

Rate \$ 27.14 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 97

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

Rate \$ 25.78 per day unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 87

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

Rate \$ 25.78 per day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 98

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

Care is considered full time if the child is at a facility at least 5 hours and up to 10 hours.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). July 1, 2014

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

The information used to complete the above responses were used from information gathered from urban and rural programs across the state.

l) Provide the citation or link, if available, to the payment rates. This information is provided behind a provider portal page that requires a log in. Each provider is able to calculate the amount they would receive based off of custom settings such as age type, care type and number of children in the classroom.

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

N/A

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

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

Differential rate for *non-traditional hours*.

Describe:

We take care of this with our Night Care and Weekend multipliers using both our Market Rate Survey and Cost model.

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

Describe:

Special Needs is currently handled using a separate multiplier that is added to the other multipliers based on the States Better Beginnings Rate.

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

add-on.

Describe:

Also handled through our age type multipliers, each age group has a separate multiplier based upon our MRS/Cost Model.

Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

Controlled by the Better Beginnings multiplier at each level based on the MRS and Cost Model.

Differential rate for higher quality, as defined by the state/territory.

Describe:

Controlled by the Better Beginnings multiplier at each level based on the Market Rate and Cost Model.

Other differential rates or tiered rates.

Describe:

N/A

Tiered or differential rates are not implemented.

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

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

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF

system; and any barriers to participation, including barriers related to payment rates and practices.

The public and parents of subsidized children have access to the full range of providers relative to the number and capacity of those providers.

b) Describe how payment rates are adequate and have been established based on the [most recent MRS or alternative methodology](#) . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

In addition to meeting national recommendations (Branscome, 2015; Grobe et al., 2008), differences in response rates for programs that receive state funding make it necessary to use sample weights. To compute sampling weights, each combination of the categories which significantly predicted having pricing data was calculated (i.e., each classification of program type, yearly schedule, ABC, Better Beginnings and voucher acceptance). Sample weights were computed as the ratio of the total percentage of programs in multiple sampling types by the percentage with pricing data. computed as the ratio of the total percentage of programs in multiple sampling types by the percentage with pricing data.

Because the vast majority of programs in Arkansas receive state or federal support for children in their care (88.1%), we also weighted pricing by the number of private pay slots. For each age group and type of provider, an adjusted capacity number was estimated by reducing the licensed capacity by the number of children receiving support from state or federal funds.

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

DHS has mandated that All CCDF Provider Participants meet the health, safety, and quality requirements prior to accepting reimbursement for CCDF assistance.

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

provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

Some programs operate at levels of quality that exceed Better Beginnings levels. ABC preschool and Head Start/Early Head Start programs are examples. Within our models, tuition or reimbursement for tuition for rural programs is set at the ABC rate for infants, toddlers, and preschoolers (\$27.40/day) and at a 5% increase above the Level 3 rate for school-age children. Urban programs at Level 3 that care for infants and toddlers are currently receiving more than the ABC rate for those children. Therefore, day rates for infants and toddlers in urban programs were modeled with a 5% bonus above Level 3 funding, preschoolers were assumed to be at the ABC rate (\$27.40/day), and school-age children were modeled with a 5% increase above Level 3 funding.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

Limit the maximum co-payment per family.

Describe: .

DCCECE believes that the established urban and rural rates are sufficient to ensure equal access.

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

The Division will implement a lower co-payment amount for higher quality of care. Copays will be tiered based on Better Beginnings level; level 3 and up will have no copay.

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

Arkansas has implemented a graduated phase-out to assist parents with not paying the full cost of child care by raising the State Medium Income level from 60% to 85% SMI. Child care assistance will not be terminated until the parent's income exceed 85% SMI.

Other.

Describe:

NA

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

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

If the Provider Participant's normal rate is higher than the reimbursement rate, the Participant is not allowed to charge the client the difference between the two rates unless the Participant's facility is certified as Level 2 or higher in their Quality Ratings.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

The Division currently does not capture this information in its data analysis

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

N/A

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

The Arkansas Division of Child Care and Early Childhood Education (DCCECE) has taken steps to increase the quality of care provided throughout the state without harming the financial well-being of early childhood care and education (ECCE) businesses. The Divisions believes that the payment practices are sufficient to support equal access to providers.

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

Geographic area.

Describe:

Arkansas has grouped market rate geographic areas by county which has caused large disparities in rates between more urban communities and rural Arkansas. Effective 7/1/2014 Arkansas utilized two geographic areas (rather than 75 counties) for purposes of market rate caps for providers who participated in our Quality Incentive Rate structure. Based on data derived from the 2013 Rural-Urban Continuum Codes from the US Department of Agriculture's Economic Research Service ("USDA Economic Research Service - Rural-Urban Continuum Codes," 2013), we segregated those counties classified as Urban from the rest of the state. In the course of our review we noted increased market rates in these counties versus rural areas and determined that a distinct geographic area and a rate differential was needed in order to reasonably capture the market characteristics of these regions. Since Arkansas is largely rural the results were twenty (20) urban counties with the remaining fifty-five (55) counties classified as rural. DCCECE believes this provides a more reasonable basis for market rate classifications and that it will provide the ability for smaller markets to make the jump to quality care in the future as lightly populated counties often suffered under very low rate restrictions. DCCECE believes that the established urban and rural rates are sufficient to ensure equal access.

Type of provider.

Describe:

Payment rates does not vary based on type of provider.

Age of child.

Describe:

Payment rates vary based on age of child.

Quality level.

Describe:

Payment rates vary based on quality level. Payment rate increases as the quality level increases (1-3).

Other.

Describe:

N/A

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

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

Describe:

N/A

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

Describe:

N/A

Feedback from parents, including parent surveys or parental complaints.

Describe:

N/A

Other.

Describe:

N/A

4.5 Payment Practices and the Timeliness of Payments

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

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

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

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

- a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

DHS agrees to reimburse the Participant for services delivered in compliance with this Agreement after the Certificate of Authorization has been received and services are rendered

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

Describe the policy or procedure.

Providers can bill the day after services are rendered and payment will be available within 3 - 5 days

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

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

Describe the policy or procedure.

DHS will permit billing for a temporarily absent child if the billing conforms to the requirements of the federal or state funding source. All absentee billing must be submitted in accordance with the requirements set out below. DHS will not permit billing when the facility is closed unless it is an observed holiday or inclement weather

Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

DHS recognizes that early departure occurs for children in care. DHS agrees to pay the normal daily rate when a child is picked up earlier than usual

Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

Providers are allowed to bill for 10 holidays per year and a maximum of 40 absentee days per child per year

- Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

N/A

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

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

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

Providers are paid in increments of part time (up to 3 hours), half time (between 3 and 5 hours), and full time (between 5 and 10 hours).

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

Describe the policy or procedure.

The Participant may charge the client additional reasonable fees including, but not limited to, registration, late pick-up, late payment fee, insurance and materials. The Participant also has the option to charge the client for absentee days that exceed the limit allowed by this agreement. Any reasonable charges must be fully disclosed in a document to the client and available to DHS upon request. Reasonable fees must not exceed fees paid by private pay clients

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

DHS will reimburse provider participants in accordance to the written arrangement outlined in the DHS Participant Agreement. Provides can bill for services based on

the electronic DHS Certificate of Authorization. The certificate does not include reasonable charges to parents for special events outside the usual daily program costs. Further, the Participant Agreement gives instruction for participants to appeal any adverse action taken by DHS including audit, billing, payment, or termination.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

Providers are notified through the Child Care Billing System electronically when a child's authorization is changed. In addition, DCCECE Family Support Specialist are required to contact the provider regarding changes to a client's eligibility status that could impact payments.

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

Providers can appeal any adverse action taken by DHS by filling a written notice of appeal within thirty (30) days from the participant's receipt of DHS notification in accordance with DHS Administrative Appeal/Hearing Procedures.

g) Other. Describe:

NA

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

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

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

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

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

In licensed family child care.

Currently, it's difficult to identify shortages in private pay settings within our state because data is not collected on private pay. However, Tableau Reader is used to map out areas where there is a shortage of licensed child care slots that are paid for using CCDF funds and not private pay slots. The Search for Child Care page is utilized to identify high-quality providers by county and zip code. This resource is shared with families to support equal access and parental choice.

In licensed child care centers.

Currently, it's difficult to identify shortages in private pay settings within our state because data is not collected on private pay. However, Tableau Reader is used to map out areas where there is a shortage of licensed child care slots that are paid for using CCDF funds and not private pay slots. The Search for Child Care page is utilized to identify high-quality providers by county and zip code. This resource is shared with families to support equal access and parental choice.

Other.

N/A

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

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

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts. In addition, the Arkansas Child Care Aware Resource & Referral Network, funded by DCCECE, provides support services, resources and training opportunities for licensed and registered family child care providers, as well as, those interested in opening a family child care home. DCCECE works in collaboration with the family child care home association and the director is a member of the State Advisory Council.

Start-up funding.

Describe:

N/A

[Technical assistance support.](#)

[Describe:](#)

DCCECE contracts with institutions of higher education, nonprofit organizations and state agencies to provide technical assistance to all licensed and registered facilities statewide. Technical Assistance areas include licensing, QRIS, administrative, curriculum, behavior guidance, transportation supports and more.

[Recruitment of providers.](#)

[Describe:](#)

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts.

[Tiered payment rates \(as discussed in 4.3.2\).](#)

[Describe:](#)

In 2014-2015, DCCECE introduced a tiered reimbursement system for programs providing education to families using child care vouchers. Programs that provide a level of service exceeding minimum licensing can be accredited through Better Beginnings, the state's quality rating improvement system for early childhood programs. Better Beginnings currently has three quality levels. Through the new system, voucher reimbursement rates increase with each level. Reimbursement rates offset the expense of meeting higher quality standards, especially for Level 3 programs.

[Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

DCCECE's contracted professional development agencies offer training, coaching and technical assistance for free to all licensed and registered facilities. There are numerous opportunities for providers to learn how to improve business practices including participation in the following:

Director's Orientation, Arkansas Children's Program Administrator Certificate/Credential, Program Administration Scale, Business Administration Scale, Family Child Care Business Management and Money Matters.

[Accreditation supports.](#)

Describe:

Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards. The QRIS incentive grant provides a cash award upon initial certification for each star level achieved.

[Child Care Health Consultation.](#)

Describe:

DCCECE funds Healthy Child Care Arkansas, an organization that provides a quality health and safety resource service for early child care providers, parents/guardians, and health care professionals. The HCCAR staff is comprised of a developmental pediatrician, a general pediatrician, a pediatric psychologist, and child care health specialists who are advanced practice nurses. Training on best practice standards recognized by experts in medicine and behavioral health are provided statewide through live workshops and web-based trainings. A full time, trained RN Child Care Health Consultant is available to providers by telephone Monday through Friday at no charge. Information and consultation is based on *AR Minimum Licensing Requirements* and *Caring for Our Children* which are the evidence-based national standards for health and safety standards for child care.

[Mental Health Consultation.](#)

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a statewide program used to assist child care providers in supporting children who experience challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. In addition, DCCECE contracts with a

medical university to conduct mental health consultation services for all licensed and registered facilities.

Other.

Describe:

Arkansas has created a CCDF Pre-K initiative that will serve more eligible children in high-need communities and targeted underserved areas. DCCECE has set higher quality standards for these programs that are comparable to the Arkansas Better Chance public pre-k program.

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

b) Infants and toddlers. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts. In addition, the Arkansas Child Care Aware Resource & Referral Network, funded by DCCECE, provides support services, resources and training opportunities for licensed and registered family child care providers, as well as, those interested in opening a family child care home. DCCECE works in collaboration with the family child care home association and the director is a member of the State Advisory Council.

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

DCCECE contracts with institutions of higher education, nonprofit organizations and state agencies to provide technical assistance to all licensed and registered facilities statewide. Technical Assistance areas include licensing, QRIS, administrative, curriculum, behavior guidance, transportation supports and more.

Recruitment of providers.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts.

Tiered payment rates (as discussed in 4.3.2) .

Describe:

In 2014-2015, DCCECE introduced a tiered reimbursement system for programs providing education to families using child care vouchers. Programs that provide a level of service exceeding minimum licensing can be accredited through Better Beginnings, the state's quality rating improvement system for early childhood programs. Better Beginnings currently has three quality levels. Through the new system, voucher reimbursement rates increase with each level. Reimbursement rates offset the expense of meeting higher quality standards, especially for Level 3 programs.

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

Describe:

DCCECE's contracted professional development agencies offer training, coaching and technical assistance for free to all licensed and registered facilities. There are numerous opportunities for providers to learn how to improve business practices including participation in the following: Director's Orientation, Arkansas Children's Program Administrator Certificate/Credential, Program Administration Scale, Business Administration Scale, Family Child Care Business Management and Money Matters.

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

DCCECE funds Healthy Child Care Arkansas, an organization that provides a quality health and safety resource service for early child care providers, parents/guardians, and health care professionals. The HCCAR staff is comprised of a developmental pediatrician, a general pediatrician, a pediatric psychologist, and child care health specialists who are advanced practice nurses. Training on best practice standards recognized by experts in medicine and behavioral health are provided statewide through live workshops and web-based trainings. A full time, trained RN Child Care Health Consultant is available to providers by telephone Monday through Friday at no charge. Information and consultation is based on *AR Minimum Licensing Requirements* and *Caring for Our Children* which are the evidence-based national standards for health and safety standards for child care.

- Mental Health Consultation.

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a

statewide program used to assist child care providers in supporting children who experience challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. In addition, DCCECE contracts with a medical university to conduct mental health consultation services for all licensed and registered facilities.

Other.

Describe:

Arkansas has created a CCDF Pre-K initiative that will serve more eligible children in high-need communities and targeted underserved areas. DCCECE has set higher quality standards for these programs that are comparable to the Arkansas Better Chance public pre-k program.

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

c) Children with disabilities. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts. In addition, the Arkansas Child Care Aware Resource & Referral Network, funded by DCCECE, provides support services, resources and training opportunities for

licensed and registered family child care providers, as well as, those interested in opening a family child care home. DCCECE works in collaboration with the family child care home association and the director is a member of the State Advisory Council.

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

All child care facilities must comply with all applicable provisions as specified in IDEA: The facility shall enroll children with special needs without regard to disability. (Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.) DCCECE licensing staff work with providers to ensure facilities comply with IDEA requirements.

Recruitment of providers.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts.

Tiered payment rates (as discussed in 4.3.2).

Describe:

Children with special needs are considered a high priority for service and programs receive higher reimbursement rates for children with disabilities.

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

Describe:

DCCECE's contracted professional development agencies offer training, coaching and technical assistance for free to all licensed and registered facilities. There are numerous opportunities for providers to learn how to improve business practices including participation in the following: Director's Orientation, Arkansas Children's Program Administrator Certificate/Credential, Program Administration Scale, Business Administration Scale, Family Child Care Business Management and Money Matters.

- Accreditation supports.

Describe:

N/A

- Child Care Health Consultation.

Describe:

DCCECE funds Healthy Child Care Arkansas, an organization that provides a quality health and safety resource service for early child care providers, parents/guardians, and health care professionals. The HCCAR staff is comprised of a developmental pediatrician, a general pediatrician, a pediatric psychologist, and child care health specialists who are advanced practice nurses. Training on best practice standards recognized by experts in medicine and behavioral health are provided statewide through live workshops and web-based trainings. A full time, trained RN Child Care Health Consultant is available to providers by telephone Monday through Friday at no charge. Information and consultation is based on *AR Minimum Licensing Requirements* and *Caring for Our Children* which are the evidence-based national standards for health and safety standards for child care.

- Mental Health Consultation.

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a

statewide program used to assist child care providers in supporting children who experience challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. In addition, DCCECE contracts with a medical university to conduct mental health consultation services for all licensed and registered facilities.

Other.

Describe:

Arkansas has created a CCDF Pre-K initiative that will serve more eligible children in high-need communities and targeted underserved areas. DCCECE has set higher quality standards for these programs that are comparable to the Arkansas Better Chance public pre-k program.

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

d) Children who receive care during non-traditional hours. Check and describe all that apply

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts. In addition, the Arkansas Child Care Aware Resource & Referral Network, funded by

DCCECE, provides support services, resources and training opportunities for licensed and registered family child care providers, as well as, those interested in opening a family child care home. DCCECE works in collaboration with the family child care home association and the director is a member of the State Advisory Council.

Start-up funding.

Describe:

N/A

Technical assistance support.

Describe:

DCCECE contracts with institutions of higher education, nonprofit organizations and state agencies to provide technical assistance to all licensed and registered facilities statewide. Technical Assistance areas include licensing, QRIS, administrative, curriculum, behavior guidance, transportation supports and more.

Recruitment of providers.

Describe:

DCCECE contracts with a public relations agency to create and disseminate an outreach communications plan to providers and families. The primary goal of the plan is to inform the public about the importance of high quality care in early childhood education settings and to encourage providers to participate in Better Beginnings/QRIS. This is accomplished through a variety of methods including participation in conferences, television appearances, online publications, radio interviews, monthly newsletters, news releases, YouTube videos, social media communication and blog posts.

Tiered payment rates (as discussed in 4.3.2) .

Describe:

DCCECE provides differential rates for providers who provides night and/or weekend care. In 2014-2015, DCCECE introduced a tiered reimbursement system for programs providing education to families using child care

vouchers. Programs that provide a level of service exceeding minimum licensing can be accredited through Better Beginnings, the state's quality rating improvement system for early childhood programs. Better Beginnings currently has three quality levels. Through the new system, voucher reimbursement rates increase with each level. Reimbursement rates offset the expense of meeting higher quality standards, especially for Level 3 programs.

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

Describe:

DCCECE's contracted professional development agencies offer training, coaching and technical assistance for free to all licensed and registered facilities. There are numerous opportunities for providers to learn how to improve business practices including participation in the following: Director's Orientation, Arkansas Children's Program Administrator Certificate/Credential, Program Administration Scale, Business Administration Scale, Family Child Care Business Management and Money Matters.

- Accreditation supports.

Describe:

N/A

- Child Care Health Consultation.

Describe:

DCCECE funds Healthy Child Care Arkansas, an organization that provides a quality health and safety resource service for early child care providers, parents/guardians, and health care professionals. The HCCAR staff is comprised of a developmental pediatrician, a general pediatrician, a pediatric psychologist, and child care health specialists who are advanced practice nurses. Training on best practice standards recognized by experts in medicine and behavioral health are provided statewide through live workshops and web-based trainings. A full time, trained RN Child Care Health

Consultant is available to providers by telephone Monday through Friday at no charge. Information and consultation is based on *AR Minimum Licensing Requirements* and *Caring for Our Children* which are the evidence-based national standards for health and safety standards for child care.

Mental Health Consultation.

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a statewide program used to assist child care providers in supporting children who experience challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. In addition, DCCECE contracts with a medical university to conduct mental health consultation services for all licensed and registered facilities.

Other.

Describe:

N/A

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

e) Other. Check and describe all that apply:

Grants and contracts (as discussed in 4.1.3).

Describe:

N/A

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

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

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

HCCAR is a multi-disciplinary team of health professionals from the University of Arkansas for Medical Sciences (UAMS) who aim to improve the quality of children's health in early child care settings. We offer information and consultation to child care professionals using best practice recommendations in various topics related to the overall well-being of children. The HCCAR goal is carried out in three ways:

1. By providing live and web-based trainings on best practice standards recognized by experts in medicine and behavioral health;
2. By providing free of charge consultations to child care professionals and Child Care Aware agencies on issues related to children's health through a full-time Child Care Health Consultant available from 8-4 p.m. Monday through Friday;
3. By providing relevant and current health related information that is accessible through this website to give up-to-date information about health and behavioral health issues that are important to your center.

HCCAR is funded through a grant from the Arkansas Department of Human Services. This grant is specific for Child Care Professional Development/Technical

Assistance/Training in the State of Arkansas. HCCAR is a collaboration between the Arkansas Department of Human Services, UAMS Department of Pediatrics, and UAMS KIDS FIRST to provide a health resource service for early child care providers with the help of the seven Child Care Aware agencies across Arkansas.

The HCCAR initiative brings together health care professionals, early care and education professionals, child care providers, and families to improve the health and safety of children in child care.

Mental Health Consultation.

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a statewide program used to assist child care providers in supporting children who experience challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. We have contracted with a mental health professional group called Project Play.

Other.

Describe:

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

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

Arkansas has created a CCDF Pre-K initiative that will serve more eligible children in high-need communities and targeted underserved areas. DCCECE has set higher quality standards for these programs that are comparable to Arkansas's Arkansas Better Chance (ABC) program. DCCECE used characteristics such as the following in selecting programs:

The extent to which the county is underserved, measured by the difference between the number of eligible four-year-old children in the county and the number of children currently served by ABC and Head Start.

Low-performing schools, measured by whether the county included schools designated by the Arkansas Department of Education (ADE) as "Needs Improvement-Focus" schools or "Needs Improvement Priority."

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs **DCCECE is currently working with Arkansas State University (ASU) to provide training and technical assistance to providers who do not have a high-quality program across the state.**

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

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

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

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be

licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

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

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

5.1 Licensing Requirements

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

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

Center-based child care.

Describe and Provide the citation:

Arkansas has comprehensive Minimum Licensing Requirements for the following licensing types:

Child Care Centers, Out of School Time Care, Licensed Child Care Family Homes, and Registered Child

Care Family Homes. No providers are "exempt." The Minimum Licensing Requirements are available for review on the website.

Family child care.

Describe and Provide the citation:

Arkansas has comprehensive Minimum Licensing Requirements for the following licensing types:

Child Care Centers, Out of School Time Care, Licensed Child Care Family Homes, and Registered Child

Care Family Homes. No providers are "exempt." The Minimum Licensing Requirements are available for review on the website.

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

Describe and provide the citation (if applicable):

Arkansas has comprehensive Minimum Licensing Requirements for the following licensing types:

Child Care Centers, Out of School Time Care, Licensed Child Care Family Homes, and Registered Child

Care Family Homes. No providers are "exempt." The Minimum Licensing Requirements are available for review on the website. In home care falls under the Registered Child Care Family Home requirements.

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

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3.
No providers are exempt.

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

Center-based child care.

If checked, describe the exemptions.

No exemptions.

Family child care.

If checked, describe the exemptions.

No exemptions.

In-home care.

If checked, describe the exemptions.

No exemptions.

5.2 Health and Safety Standards and Requirements for CCDF Providers

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

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

a) Licensed CCDF center-based care

1. Infant

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

301.2

Birth - 18 months for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Ratio:

301.2

1:5 for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Group size:

301.13

10 for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

Staff members shall be 18 years of age or older, shall have a GED, and shall have 8 hours of preservice training prior to being left alone with children for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

2. Toddler

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

301.2

18-36 months for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Ratio:

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

301.2

1:8 for licensed programs. Arkansas does not have any license exempt providers or programs.

-- Group size:

301.13

16 for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

Staff members shall be 18 years of age or older, shall have a GED, and shall have 8 hours of preservice training prior to being left alone with children for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

3. Preschool

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

301.2

3-4 years old for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Ratio:

301.2

2 1/2 to 3 years 1:12

4 years old 1:15

Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Group size:

301.13

24 and 30 for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

Staff members shall be 18 years of age or older, shall have a GED, and shall have 8 hours of preservice training prior to being left alone with children for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

4. School-age

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

301.2

Kindergarten and up for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Ratio:

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

301.2

1:18 for licensed programs. Arkansas does not have any license exempt providers or programs.

-- Group size:

301.13

36 for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

Staff members shall be 18 years of age or older, shall have a GED, and shall have 8 hours of preservice training prior to being left alone with children for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

None are exempt, Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

301.5

The ratio shall be kept for the age of the youngest child in the group. The respective group size limit would apply. Staff members shall be 18 years of age or older, shall have a GED, and shall have 8 hours of preservice training prior to being left alone with

children for licensed programs. Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

302

Directors shall be twenty-one (21) years of age or older, and provide documentation of one of the following educational levels (Directors previously approved prior to the implementation of these requirements may continue in their position and do not have to meet these educational levels):

Bachelor's Degree or higher Degree in Early Childhood, Child Development or a related field from a regionally accredited college or university. (Determination of "related field" shall be made by the Division)

Bachelor's Degree in a non-related field from a regionally accredited college or university plus one of the following:

- Four years of experience in early childhood education
- Current Child Development Associate Credential (CDA)
- Birth - Pre K Credential

Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

b) Licensed CCDF family child care provider

1. Infant

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

300

301 Staff/Child Ratios

301.1 One Caregiver:

A. 3-6 children ages 0-up (no more than 3 under 2 years)

B. 7 children ages 0-up (no more than 2 under 2 years)

- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Ratio:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)

- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-__June_2018.pdf

-- Group size:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)

- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

300

The primary caregiver must be age 21 or older. The secondary caregiver must be age 18 or older. A high school diploma or GED is required.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

2. Toddler

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

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)

- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Ratio:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)

D. 10-14 children ages 0-up (no more than 5 under 2 years)

E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Group size:

300

301.1 One Caregiver:

A. 3-6 children ages 0-up (no more than 3 under 2 years)

B. 7 children ages 0-up (no more than 2 under 2 years)

C. 8 children ages 0-up (no more than 1 under 2 years)

D. 9 children ages 2-up (no more than 3 between 2 & 3 years)

E. 10 children ages 3-up

301.2 Two Caregivers:

A. 3-6 children ages 0-up

B. 7 children ages 0-up (no more than 4 under 2 years)

C. 8 children ages 0-up (no more than 4 under 2 years)

D. 9 children ages 0-up (no more than 4 under 2 years)

E. 10-14 children ages 0-up (no more than 4 under 2 years)

F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

A. 7 children ages 0-up (no more than 5 under 2 years)

B. 8 children ages 0-up (no more than 5 under 2 years)

C. 9 children ages 0-up (no more than 5 under 2 years)

D. 10-14 children ages 0-up (no more than 5 under 2 years)

E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

The primary caregiver must be age 21 or older. The secondary caregiver must be

age 18 or older. A high school diploma or GED is required.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

3. Preschool

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

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Ratio:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Group size:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)

- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

The primary caregiver must be age 21 or older. The secondary caregiver must be age 18 or older. A high school diploma or GED is required.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

4. School-age

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

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)

- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)
- D. 10-14 children ages 0-up (no more than 5 under 2 years)
- E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Ratio:

300

301.1 One Caregiver:

- A. 3-6 children ages 0-up (no more than 3 under 2 years)
- B. 7 children ages 0-up (no more than 2 under 2 years)
- C. 8 children ages 0-up (no more than 1 under 2 years)
- D. 9 children ages 2-up (no more than 3 between 2 & 3 years)
- E. 10 children ages 3-up

301.2 Two Caregivers:

- A. 3-6 children ages 0-up
- B. 7 children ages 0-up (no more than 4 under 2 years)
- C. 8 children ages 0-up (no more than 4 under 2 years)
- D. 9 children ages 0-up (no more than 4 under 2 years)
- E. 10-14 children ages 0-up (no more than 4 under 2 years)
- F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

- A. 7 children ages 0-up (no more than 5 under 2 years)
- B. 8 children ages 0-up (no more than 5 under 2 years)
- C. 9 children ages 0-up (no more than 5 under 2 years)

D. 10-14 children ages 0-up (no more than 5 under 2 years)

E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Group size:

300

301.1 One Caregiver:

A. 3-6 children ages 0-up (no more than 3 under 2 years)

B. 7 children ages 0-up (no more than 2 under 2 years)

C. 8 children ages 0-up (no more than 1 under 2 years)

D. 9 children ages 2-up (no more than 3 between 2 & 3 years)

E. 10 children ages 3-up

301.2 Two Caregivers:

A. 3-6 children ages 0-up

B. 7 children ages 0-up (no more than 4 under 2 years)

C. 8 children ages 0-up (no more than 4 under 2 years)

D. 9 children ages 0-up (no more than 4 under 2 years)

E. 10-14 children ages 0-up (no more than 4 under 2 years)

F. 15-16 children ages 0-up (no more than 2 under 2 years)

301.3 Three Caregivers

A. 7 children ages 0-up (no more than 5 under 2 years)

B. 8 children ages 0-up (no more than 5 under 2 years)

C. 9 children ages 0-up (no more than 5 under 2 years)

D. 10-14 children ages 0-up (no more than 5 under 2 years)

E. 15-16 children ages 0-up (no more than 4 under 2 years)

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

-- Teacher/caregiver qualifications:

303

The primary caregiver must be age 21 or older. The secondary caregiver must be age 18 or older. A high school diploma or GED is required.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-__June_2018.pdf

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

Arkansas does not have any license exempt providers or programs.

c) In-home CCDF providers:

1. Describe the ratios

Section 103

1:5

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-__June_2018.pdf

2. Describe the group size

Section 103

5

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-__June_2018.pdf

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

Section 103

5

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-__June_2018.pdf

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

103.7

The providers own preschool children would count in the ratio.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-__June_2018.pdf

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

Section 103

There are not any limits on infants and toddlers or additional school age children that are allowed for part of the day.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-_June_2018.pdf

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.2 Health and safety standards for CCDF providers.

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

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

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

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

Minimum Licensing Requirements (MLR) contain extensive health requirements, including immunization requirements, universal precautions, exclusion of children with contagious illnesses, sanitation issues including hand washing requirements for staff and children.

See MLR Health section 1100 and appendix tables 1 and 2 for immunization requirements

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

The Minimum Licensing Requirements, Health Section 1100 Health, includes the list of excluded illnesses, guidelines for notifying parents of contagious illness, medication guidelines, universal precautions, communicable disease reporting, immunization requirements, hand washing, and recommendations for adult immunizations.

Arkansas does not have license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

There are no variations by category of care. Section 1100 of the Child Care Family Home Minimum Licensing Requirements.

Arkansas does not have license exempt providers or programs.

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

Only with regard to immunizations. See Immunization Requirements for Child Care and Early Childhood Education Facilities, tables 1 & 2 page 77-81.

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-- Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

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

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

Minimum Licensing Requirements section 1003 Back to sleep is required for infants 12 months and below. There are Minimum Licensing Requirements on safe cribs, bedding, etc. as well as supervision of sleeping infants.

Arkansas does not have any license exempt providers or programs.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities. Section 1003 covers infant and toddler sleeping requirements.

Sleeping infants & toddlers shall be visually monitored at all times and physically checked regularly for breathing.

2. Infants/toddlers shall be placed in age appropriate cribs, cots, or mats meeting CPSC standards, for when they fall asleep. (Note: Also, any items used in the crib must be used according to manufacturer guidelines, regardless if the child is sleeping or not, in accordance with 1001.1).

3. Infants (children 12 months of age and below) shall be placed flat on their backs to sleep, in accordance with American Academy of Pediatrics guidelines, to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician

must be in the file stating the reason, the sleep position indicated, and the time frame this is required

4. Infants' sleep space (e.g. crib) shall be free of loose bedding. If a light blanket is necessary, it should be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.

1. Swaddling infants shall not be practiced except as directed in writing by the child's physician.
2. Pillows (including nursing or "boppy" pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.
3. Bibs, necklaces, and garments with ties or hoods shall be removed from infants prior to rest/naptime.

9. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be removed or repaired as indicated.

10. An individually labeled crib or safe playpen with a waterproof mattress shall be provided for each child less than 12 months of age. A bassinet shall not be used. (Please note that the CPSC does not recommend the use of playpens in licensed child care.)

11. The following guidelines shall be required for cribs:

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

There is not any variation by category of care. Arkansas does not have any license exempt providers or programs.

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

These standards are geared towards infants.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

Section 1101.6 states Medication shall be given to children only with signed parental permission which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for...

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 1101, General Health Requirements

Medication shall be given to children only with signed parental permission which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for. It shall be in the original container with a child resistant cap, not have an expired date, and be labeled with the child's name. (Aspirin substitutes, such as ibuprofen and acetaminophen, may be provided by the facility if parental permission has been granted. These medications shall be in the original container.) Staff shall not dispense medications in dosages that exceed the recommendations stated on the medication bottle.

Medication shall be returned to the parent or disposed of properly when a child withdraws from the program or when the medication is out of date.

Medicine shall be stored at the proper temperature, separately from food at all times.

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

There are no variations by category of care.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

1101.15 The facility shall follow any health or medical care plans and/or medical documentation as provided by the child's physician, parent, or guardian.

The Minimum Licensing Requirements do not currently address in depth prevention of and response to food and allergic reactions.

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

1101 Minimum Licensing Requirements for Child Care Centers, 1102.7 Licensed Child Care Family Homes, 1102.5 Registered Family Homes, and Out of School Time facilities.

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

Arkansas does not have any license exempt providers or programs.

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

N/A

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

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

Minimum Licensing Requirements for building and grounds address hazards and maintenance of buildings and grounds. Fenced play areas free of hazards are required. Buildings and grounds must meet state fire and health regulations. The buildings section is 800 and the grounds section is 900, both sections address general hazards, which is where DCCECE would cite any hazards related to those listed above.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 800 Buildings

All space used by a center shall be kept clean and free of hazardous or potentially hazardous objects. (These objects include, but are not limited to, poisonous substances, firearms, explosives, broken toys/equipment, or other objects that could be harmful or dangerous, if they are determined to be accessible to children.)

Section 900 Playgrounds/Outdoor Learning Environment

A diagram of the playground shall be submitted, clearly identifying the perimeter of the playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of

photographs with a diagram or a satellite photo from an internet site such as Google Maps. The designated and agreed upon play area, specifying the exact play area and equipment to be used and the associated documents, are critical parts of the terms of the license.

Any changes in the play area boundaries and/or equipment requested must be submitted in writing and approved prior to use.

All areas where children play outdoors shall be properly maintained.

The area shall be free of hazards or potentially hazardous objects.

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

There are no variations by category of care.

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

There are no variations based on the ages of the children.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

306.4 All caregivers in child care centers are required to have training on shaken baby syndrome, which includes prevention, and mandated reporter training prior to being left alone with children. Providers are required to give parents of infants' information on shaken baby syndrome. All directors receive training on child maltreatment as well. Home providers receive information and distribute it to all parents of infants in accordance with Carter's Law. (Act 1208

of 2013)

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

306.4.1 Minimum Licensing Requirements for Child Care Centers, 603.5 Licensed Child Care Family Homes.

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

Homes are not required to receive this preservice training. They are given educational materials that they are required to share with parents of infants.

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

There are not any variations based on the age of the children.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

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

1201 The facility shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as

a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.

The written plan shall include the following information:

1. Designated relocation site and evacuation route Procedures for notifying parents of relocation Procedures for ensuring family reunification
2. Procedures to address the needs of individual children, including children with special needs
3. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency
4. Plans to ensure that all staff and volunteers are familiar with the components of the plan

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

1220 section, Safety Requirements

1. Within 30 days of licensure and within 30 days of any change or modification of the floor plan, the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):
 - a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
 - b. The location or locations where children enrolled in child care spend time regularly
 - c. The escape routes approved by the local fire department for the child care facility
 - d. The licensed capacity and ages of children per room at the facility
 - e. The contact information for at least two emergency contacts for the facility
 - f. An aerial view of the child care facility and property used by the child care facility shall be included with the floor plan if available
2. The facility shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies

that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.

3. The written plan shall include the following information:

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

There are not any variations by category of care.

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

There are not any variations based on the ages of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

1101.16 Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that are properly disposed of after each use. Hands shall be washed even after using gloves.

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 1101 General Health Requirements

It is recommended that universal precautions be used when handling and disposing of materials containing bodily secretions such as wet or soiled diapers, fecal matter, etc. Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.)

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

There are not any variations by category of care.

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

There are not any variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

9. Precautions in transporting children (if applicable)

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

1300 Arkansas has extensive transportation requirements, including the use of rosters, child safety alarms, driver training, and vehicle maintenance.

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 1300 Transportation

1. The requirements in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.
2. When children are transported emergency contact information shall be maintained on the vehicle at all times.
3. Staff transporting children shall meet the following requirements:
 1. Be at least twenty-one (21) years of age or the minimum age required by the Licensee's commercial auto insurance
 2. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the staff's record
 3. Successfully completed the training course in Driver Safety that is offered or approved by the Division prior to transporting children. Verification of the completed course in Driver Safety shall be maintained on site in the staff's record.
 - d. At least one adult on the vehicle shall be certified in CPR and First Aid.
4. The vehicle(s) used for the transportation of children shall be in compliance with Arkansas state laws on transportation of children.
5. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.
6. Commercial insurance coverage shall be maintained for any vehicle used for transportation by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of children. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:
 1. Minimum coverage of \$100,000 Combined Single Limit (CSL)
 2. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
 3. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
7. Driver may be counted in staff/child ratio, but shall not be the only adult when more

than 12 children over three years of age and older are transported.

8. For transporting children kindergarten and above only, a ratio of 1:18 shall be maintained. Driver may be counted in staff/child ratio.

9. Any child who is less than 6 years old or weighs less than 60 pounds shall be restrained in a child passenger safety seat. Any child who is at least 6 years or weighs at least 60 pounds must be restrained by a safety belt. (Act 470 of 2001).

Conventional school busses are exempt from this requirement except for the transportation of infants/toddlers. (See#1302.2) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.

10. There shall be a seating space and an individual, appropriate restraint system provided for each child transported.

11. Rosters listing the date, the names and the ages/date of birth of all children being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check children on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the facility. Transportation rosters shall be kept by the facility and available for review for one year.

12. To insure that no children are left on the vehicle, the driver or a staff member must walk through the vehicle and physically inspect each seat before leaving the vehicle. The driver or the staff member, who conducted the walk through inspection, must sign the transportation roster to verify that all children have exited the vehicle.

13. To insure that children have safely arrived in the appropriate classroom, the transportation roster shall be reviewed by the Director or designee and compared with classroom attendance records. The Director or designee shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the classroom.

14. Any vehicles designed or used to transport more than seven (7) passengers and one (1) driver must have approved child safety alarm devices installed. These devices

must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

Clarification -

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.
- The alarm system may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the devices manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children are being delivered at the facility. Other options must be approved by the Licensing Unit.**

Options

1. Unload all of the children, walk through the vehicle to ensure that no children remain on board and deactivate the alarm. (This option will only work if you are able to unload all children in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all children have been unloaded to ensure that no child is left on board. (This option will require at least two staff members, one to supervise the children and one to remain inside the vehicle.)
3. Upon arrival, deactivate the alarm and unload the children. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

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

There are no variations based on the category of care.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

306

Currently the Director and Assistant Director, as well as 50% of center staff must be certified.

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 306 Professional Development

The director, site supervisor, and 50% of the facility staff that are on site at any given time shall have a certificate of successful completion of first aid and CPR from an approved organization.

- a. The curriculum shall conform with current American Heart Association or American Red Cross guidelines.
- b. The curriculum shall require hands on, skill-based instruction, as well as written and practical testing. Training and certification that is provided solely "on-line" will not be accepted.
- c. The instructor shall be qualified and authorized to teach the curriculum and shall be

certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)

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

303.7

For Licensed and Registered Homes, one person must be on site at all times who has current certification.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

11. Recognition and reporting of child abuse and neglect

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

306.4

All center staff must be trained in mandated reporting before being left alone with children.

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 306 Professional Development

All new staff, including volunteers who are counted in the ratios shall receive the following orientation (unless the staff has prior documented training in the required areas).

1. Introduction (8 clock hours) to be completed before being left alone with children:
 - a. Proper supervision of children
 - b. Behavioral guidance practices
 - c. Safe sleep practices for infants
 - d. Shaken baby syndrome; which includes prevention (Carter's Law, Act 1208)
 - e. Appropriately responding to a crying/fussy infant/child
 - f. Emergency procedures in the event of severe weather, or fire, including evacuation procedures and routes, and location and use of fire extinguishers.
 - g. Mandated reporter training
 - h. Administering medication
 - i. Caring for children with special needs / care plans
 - j. Transportation and car seat safety
 - k. Policies regarding release of children to authorized individuals

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

Homes receive mandated reporter training during the new study process prior to licensure and must have a written mandated reporter policy.

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

There are no variations based on the ages of the children.

-- Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

No, if no, skip to 5.2.3.

Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

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

701

All meals and snacks provided must meet current USDA requirements.

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

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Section 701 Nutrition Requirements

Breakfast, lunch, snacks and evening meals shall each meet *current* U.S. Department of Agriculture guidelines, including portion size. (See Appendix C) Menus for all food service shall be posted. See Division web-site. If sack lunches are utilized, the facility shall ensure that they also meet these requirements. Milk shall be served to each child during the day. Exceptions may be made for children who suffer allergies to milk.

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

There are no variations by category of care.

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

There are no variations based on the ages of children in care.

--Describe if relatives are exempt from this requirement

Relatives are not exempt.

2. Access to physical activity

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

401.4

Arkansas has a requirement of 30 minutes per day of moderate to vigorous physical activity.

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

401.4 Minimum Licensing Requirements for Child Care Centers,

401.8 Licensed Child Care Family Homes,

401.9 Registered Family Homes,

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

402.1 Out of School Time states a minimum of 30 minutes of outdoor activity shall be provided in suitable weather.

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

402.1 Out of School Time states a minimum of 30 minutes of outdoor activity shall be provided in suitable weather.

--Describe if relatives are exempt from this requirement

Relatives are not exempt.

3. Caring for children with special needs

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

1400 Arkansas standards define and address special needs and require providers to comply with all applicable provisions of IDEA.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_OST_mark-up-June_2018.pdf

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

Section 1400 Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_OST_mark-up-June_2018.pdf

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

There are no variations by category of care.

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

There are no variations based on age.

--Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

Describe:

401.5 Minimum Licensing Requirements include requirements for a daily schedule with lesson plans and an approved curriculum that meets the Arkansas Early Learning Standards.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

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

401.5 Minimum Licensing Requirements include requirements for a daily schedule with lesson plans and an approved curriculum that meets the Arkansas Early Learning Standards.

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

401.5 Minimum Licensing Requirements for Child Care Centers, 401.2 Licensed Child Care Family Homes, 401.2 Registered Family Homes, and 401 Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_OST_mark-up-

[June_2018.pdf](#)

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

All categories of care use Arkansas Early Learning Frameworks except Out of School Time, which does not use that specific language but does have similar requirements.

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

There are no variations based on age.

--Describe if relatives are exempt from this requirement

Relatives are not exempt.

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

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

Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

306.4

8 hours

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-

[_June_2018.pdf](#)

2. Licensed FCC homes:

Home providers attend pre-approval consultations and receive technical assistance during the new study.

3. In-home care:

In-Home providers attend pre-approval consultations and receive technical assistance during the new study. However, all licensed In-home care provider participants are required to complete the online Health and Safety training modules to receive CCDF reimbursement.

4. Variations for exempt provider settings:

There are no exempt providers in Arkansas.

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

306.4 The trainings have to be completed before being left alone with children.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

There are no differences based on the ages of children served.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

This preservice training is available online or in person with an approved alternative compliance by DCCECE.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is currently not in the 8 hours of preservice training, but is covered thoroughly in the Health Section (1101) of the Minimum Licensing Requirements for Child Care Centers, and Out of School Time facilities. This is covered for CCDF providers in the CCDF module 1.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is included in the 8 hour pre-service training requirement 306.4 for child care centers, and is covered in the Minimum Licensing Requirements section 1003 for Child Care Centers, 1001 Licensed Child Care Family Homes, 1001 Registered Family Homes.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-_June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4 This is covered in the 8 hours of pre-service training for child care centers, and administration of medication is addressed in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities. Licensed and registered home providers get this information during the new study.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4 The 8 hour pre-service training and the New Director's Orientation training both address medical care plans and the importance of planning and implementing the plans, however, this does not include comprehensive training on prevention and response to emergencies due to food and allergic reactions.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is not covered in the 8 hours of pre-service training. This is covered in sections 800 and 900 and Minimum Licensing Requirements for all facility types.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4

This is covered in the 8 hour pre-service training for child care centers and in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4 This is included in the required 8 hours of pre-service training for child care centers and in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is in CCDF training for all CCDF participants Module 8.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4 This is required in the 8 hours of pre-service training and is in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-

[_June_2018.pdf](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.5 requires Pediatric first aid and CPR in the training requirement for 50 % of the staff on site. This is in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed

to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.5 This is included in the required 8 hour pre-service training for child care centers and in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.4.2

Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities require that the annual training is geared toward the age of children that they work with.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

306.4 The 8 hour pre-service training requires training on proper supervision of children, behavioral guidance practices, and policies regarding release of children to authorized individuals. This is in the Minimum Licensing Requirements for Child Care Centers.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Minimum Licensing Requirements for Child Care Centers.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt.

Ongoing Training Requirements

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

a) Licensed child care centers:

306.4.2

15 hours

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

b) Licensed FCC homes:

303.6

15 hours

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

c) In-home care:

301.8

15 hours

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-June_2018.pdf

d) Variations for exempt provider settings:

There are no variations.

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

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on going requirements at this time. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Child Care Family Homes, and Out of School Time Facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

8 hours of in-service training at the time of application or employment.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with children.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with children.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

This is part of the one time pre-service training.

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Providers are trained in the area of medical care plans, but at this time there is not a requirement for comprehensive training on emergencies due to food and allergic reactions.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

See above.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

See above.

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with children.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with children.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with children, but not on-going.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is currently covered in New Director's Orientation

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Prior to transporting children

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

306.5 It is required that 50 % of staff as well as the Director and Assistant Director maintain current certification at all times. 303.7 Licensed and 301.9 Registered homes are required to have one person on site at all time who has current certification.

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCC_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_CCFH_mark-up-_June_2018.pdf

https://humanservices.arkansas.gov/images/uploads/dccece/2018_RCCFH_mark-up-_June_2018.pdf

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

50% of center staff are certified, one person on site in homes must be certified

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

50% of center staff are certified, one person on site in homes must be certified

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, Registered Family Homes, and Out of School Time facilities.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

This is an 8 hour online training that is required before caregivers can be left alone with children.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

This is a one time only preservice training.

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

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

This is not currently an ongoing requirement.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

This is not currently an ongoing requirement, however staff are required to get 15 hours of training annually, geared toward the age group that they work with.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

There are no on-going requirements. These topics are covered in the Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family

Homes, Registered Family Homes, and Out of School Time facilities.

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

See above

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Before being left alone with Children.

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

All staff are required to have 15 hours of training annually, geared towards the age group that they work with.

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

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

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

Routine unannounced monitor visits are made each trimester for most 12 month programs to verify compliance with Minimum Licensing Requirements. All essential standards are monitored at each visit and all standards are monitored annually. Complaints are investigated and follow-up visits are done to ensure compliance with corrective action measures.

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5.3.2 Inspections for licensed CCDF providers.

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

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards
Arkansas' requirements for pre-licensure inspections of licensed child care center providers in regard to compliance with health, safety, and fire standards, require a new study prior to recommendation for licensure. This includes monitoring/inspecting for compliance with all Minimum Licensing Requirements.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

Three monitor visits are completed each year. All routine monitor visits are unannounced.

3. Identify the frequency of unannounced inspections:

- Once a year
 More than once a year

Describe:

12 month programs typically get 3 visits per year, 9 month programs get 2 visits per year. The number is increased as needed based on compliance. Some programs that are two or three star rated and are in substantial compliance are placed on a high compliance monitoring schedule and are visited twice a year. All visits are unannounced.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

Essential standards include health, safety, and fire standards. Non-essential standards are monitored a minimum on once per year.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

The Child Care Licensing Specialist Procedure Manual outlines procedures for monitor visits.

MONITORING SCHEDULES

Monitor visits will be made on all in state licensed/ registered facilities according to the schedules and frequencies established by the Child Care Licensing Unit. Any variations in operational schedules or frequencies shall be discussed with and approved by the Supervisor. The frequency and schedule of monitoring must be conducted as follows:

"Twelve-month programs" will be monitored three times each calendar year.

These visits must be conducted once per trimester. These programs will have a "Once

per Trimester" Visit Frequency selected in CCLAS.

"Nine-month programs" will be monitored twice each calendar year. These programs will be monitored during the first and third trimesters. There must not be more than 8 months between monitor visits. These programs are operating during the normal school year and closed during the summer. In CCLAS these programs will have a "Two Trimesters per Year" Visit Frequency.

"Three Month" programs normally operate during the summer. Any program operating six months or less annually will be considered a "Three Month Program" and will have a "Once per Year" Visit Frequency;

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards

Arkansas' requirements for pre-licensure inspections of licensed child care center providers in regard to compliance with health, safety, and fire standards, require a new study prior to recommendation for licensure. This includes monitoring/inspecting for compliance with all Minimum Licensing Requirements.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

Homes are visited three times per year. The number of visits is increased as needed based on compliance. Some programs that are two or three star rated and are in substantial compliance are placed on a high compliance monitoring schedule and are visited twice a year.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

Three times per year

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

All essential standards are viewed at each monitor visit. Essential standards include health, safety, and fire standards. Non-essential standards are monitored a minimum on once per year.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

The Arkansas Child Care Licensing Specialist Procedure Manual details information on frequency of monitor visits.

MONITORING SCHEDULES

Monitor visits will be made on all in state licensed/ registered facilities according to the schedules and frequencies established by the Child Care Licensing Unit. Any variations in operational schedules or frequencies shall be discussed with and approved by the Supervisor. The frequency and schedule of monitoring must be conducted as follows:

"Twelve-month programs" will be monitored three times each calendar year. These visits must be conducted once per trimester. These programs will have a "Once per Trimester" Visit Frequency selected in CCLAS.

"Nine-month programs" will be monitored twice each calendar year. These programs will be monitored during the first and third trimesters. There must not be more than 8 months between monitor visits. These programs are operating during the normal school year and closed during the summer. In CCLAS these programs will have a "Two Trimesters per Year" Visit Frequency.

"Three Month" programs normally operate during the summer. Any program operating six months or less annually will be considered a "Three Month Program" and will have a "Once per Year" Visit Frequency;

c) Licensed in-home CCDF child care

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

Arkansas' requirements for pre-licensure inspections of licensed child care center providers in regard to compliance with health, safety, and fire standards, require a new study prior to recommendation for licensure. This includes monitoring/inspecting for compliance with all Minimum Licensing Requirements.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

Three monitor visits are conducted per year.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

Three times per year

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

Homes are visited unannounced three times per year. The number is increased as needed based on compliance. Some programs that are two or three star rated and are in substantial compliance are placed on a high compliance monitoring schedule and are visited twice a year.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

The Arkansas Child Care Licensing Specialist Procedure Manual outlines the procedures for conducting routine monitor visits.

MONITORING SCHEDULES

Monitor visits will be made on all in state licensed/ registered facilities according to the schedules and frequencies established by the Child Care Licensing Unit. Any variations in operational schedules or frequencies shall be discussed with and approved by the Supervisor. The frequency and schedule of monitoring must be conducted as follows:

"Twelve-month programs" will be monitored three times each calendar year. These visits must be conducted once per trimester. These programs will have a "Once per Trimester" Visit Frequency selected in CCLAS.

"Nine-month programs" will be monitored twice each calendar year. These programs will be monitored during the first and third trimesters. There must not be more than 8 months between monitor visits. These programs are operating during the normal school year and closed during the summer. In CCLAS these programs will have a "Two Trimesters per Year" Visit Frequency.

"Three Month" programs normally operate during the summer. Any program operating six months or less annually will be considered a "Three Month Program" and will have a "Once per Year" Visit Frequency;

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

The Division of Child Care and Early Childhood Education

5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified

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

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

AR does not recognize any license exempted facilities

Provide the citation(s) for this policy or procedure

N/A

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

AR does not recognize any license exempted facilities

Provide the citation(s) for this policy or procedure

N/A

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

AR does not recognize any license exempted facilities

Provide the citation(s) for this policy or procedure

N/A

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

No

Yes. If yes,

decide:

N/A

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers

N/A

5.3.4 Licensing inspectors.

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

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

The agency has minimum qualifications for Child Care Licensing Specialists, to include a Bachelor's Degree. There are specific written guidelines for new Specialists to include the topics listed above. On the job training for new CCLS should be set up with a seasoned CCLS/mentor. Regular feedback should be solicited from the mentor for progress on the training or to identify help or support the new CCLS may need. After the new CCLS has completed training with the mentor the new CCLS shall begin completing the NEW CCLS Checklist as they take the lead on tasks to document that they have obtained necessary knowledge and can perform the task. The mentor shall sign also documenting that the task was observed and to document that the new CCLS completed the tasks as lead worker. The checklist shall then be reviewed with the new CCLS and used by the supervisor to observe the new staff in the field doing the tasks. On the Job training shall include in depth training on essential standards and health and safety requirements for providers. This shall include routine monitoring for

health and safety requirements for all ages and provider types, as well as following up on deficiencies and implementing corrective action measures.

b) Provide the citation(s) for this policy or procedure

This is in the DFA policy and can be found online at:

http://www.arkansas.gov/dfa/personnel_mgmt/jobs/view_classcode.cgi?class=M053C

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

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

The State follows the StateBudgetary guidelines which governs personnel and financial approvals by the Executive and Legislative branches in government. Currently, there are 31 Licensing Specialists that inspect approximately 2000 licensed programs. This is an average of 65 programs per specialist, or roughly 16 visits per month per specialist.

b) Provide the policy citation and state/territory ratio of licensing inspectors

We do not have a policy citation. Please see above.

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

state/territory exempt relatives from the inspection requirements listed in 5.3.3?

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

N/A

No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of	x		

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

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

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

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

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current

residency		(existing) staff
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The background check law was changed in the 2017 legislative session, when act 572 was passed by the State Legislature, requiring all employees to submit FBI fingerprint checks as part of the criminal background check process. These rules are being added to the Minimum Licensing Requirements. DCCECE is in the promulgation process and the revisions are being scheduled for review by Legislative Committee. We anticipate an effective date for the new requirements to be January 1, 2019.

DCCECE does not currently require in state fingerprint checks as part of the state criminal record check process. The Arkansas State Police, the agency that by law processes the in state criminal background check requests, does not currently have the ability to run these checks based on fingerprints. We are working with our attorneys and representatives from the Arkansas State Police to explore viable options. Multiple law changes and regulation promulgation will likely be required if the Arkansas State Police is willing to consider this change.

Currently, we are processing criminal background checks based on a State Police name search for all persons working in child care. These background checks are processed in the same manner for all providers including child care centers, out of school time, licensed child care family homes and registered child care family homes.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Arkansas requires that all participating providers must be either licensed or registered. There are no exemptions to this requirement.

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints,

been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Minimum Licensing Requirements mandathat all child care staff have an in-state criminal records check to be completed at the time of employment. Fingerprints are not required to conduct this check. We have been working with the ACIC Field Agent and Agency attorneys to consider viable options. At this point compliance would require the Arkansas State Police, who are mandated by Arkansas law to conduct these checks, to change their system from a name search to a fingerprint basis at significant cost. We are mandated by state law to run our criminal background checks through the Arkansas State Police.

5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The in-state sex offender registry check is completed at the time the in-state criminal records checks is submitted through the Information Network of Arkansas. The Arkansas Sexual Offender Registry check is required under section 110.2 "The following persons shall be required to have their background reviewed through Criminal Records check (which includes the Arkansas Sexual Offender Registry) conducted by the Arkansas State Police." This procedure applies to all provider types including child care centers, out of school time, licensed child care family homes and registered child care family homes.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Arkansas requires that all participating providers must be either licensed or registered. There are no exemptions to this requirement. The Arkansas Sexual Offender Registry check is required under section 110.2 "The following persons shall be required to have their background reviewed through Criminal Records check (which includes the Arkansas Sexual Offender Registry) conducted by the Arkansas State Police." This procedure applies to all provider types including child care centers, out of school time, licensed child care family homes and registered child care family homes.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

The in-state sex offender registry check is completed at the time the in-state criminal records checks is submitted through the Information Network of Arkansas.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

N/A

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

All providers including child care centers, out of school time, licensed child care family homes and registered child care family homes are required to submit to an Arkansas Central Registry Child Maltreatment background check.

Minimum Licensing Requirements Section 109 states that all owner/operators and direct care staff, must complete an Arkansas Central Registry Maltreatment Check at initial application and every 2 years thereafter.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Arkansas requires that all participating providers must be either licensed or registered. There are no exemptions to this requirement.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

All providers including child care centers, out of school time, licensed child care family homes and registered child care family homes are required to submit to an Arkansas Central Registry Child Maltreatment background check.

Minimum Licensing Requirements Section 109 states that all owner/operators and direct care staff, must complete an Arkansas Central Registry Maltreatment Check at initial application and every 2 years thereafter.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

N/A

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

- a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.
 - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

A revision to the background check law, Act 572, was passed during the 2017 legislative session, requiring all employees to submit to FBI fingerprint checks as part of the criminal background check process. These rules are being added to the Minimum Licensing Requirements. DCCECE is in the promulgation process and the revisions are being scheduled for review by Legislative Committee. We anticipate an effective date for the new requirements to be January 1, 2019. This procedure applies to all provider types including child care centers, out of school time, licensed child care family homes and registered child care family homes.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations **Arkansas requires that all participating providers must be either licensed or registered. There are no exemptions to this requirement.**

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

A revision to the background check law, Act 572, was passed during the 2017 legislative session, requiring all employees to submit to FBI fingerprint checks as part of the criminal background check process. These rules are being added to the Minimum Licensing Requirements. DCCECE is in the promulgation process and the revisions are being scheduled for review by Legislative Committee. We anticipate an effective date for the new requirements to be January 1, 2019.

National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, NSOR is not an independent check that occurs. It is, however, a portion of the FBI background check process. At this time the requirement for NSOR would take a Promulgation change to the current rule.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, NSOR is not an independent check that occurs. It is, however, a portion of the FBI background check process. At this time the requirement for NSOR would take a Promulgation change to the current rule.

Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations

when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Legislation was passed in the 2017 Legislative Session requiring criminal registry background checks for all child care providers and staff. Through NCIC, the criminal registry information from all participating states will be available and used to determine employment in child care within Arkansas.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Legislation was passed in the 2017 Legislative Session requiring criminal registry background checks for all child care providers and staff. Through NCIC, the criminal registry information from all participating states will be available and used to determine employment in child care within Arkansas.

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in

addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide

citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, we are seeking guidance from our colleagues in the Division of Children and family Services and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Currently, we are seeking guidance from our colleagues in the Division of Children and family Services and our Office of Chief Counsel to develop an action plan to

best meet the needs of this requirement.

Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

.

The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint

check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

We are seeking a waiver for this requirement. A revision to the background check law, Act 572, was passed during the 2017 legislative session, requiring all employees to submit to FBI fingerprint checks as part of the criminal background check process. These rules are being added to the Minimum Licensing Requirements. DCCECE is in the promulgation process and the revisions are being scheduled for review by Legislative Committee. We anticipate an effective date for the new requirements to be January 1, 2019. However, there is a secondary issue that will also need to be included in the waiver request. Currently, both the Child Care Licensing Act Ark. Code Ann. 20-78-201-220, as amended, and our promulgated licensing requirements allow a provider to fully utilize a new employee as long as they initiate the required background checks within ten (10) days of employment. According to Minimum Licensing Requirement 306.2 "All new staff shall have a probationary period of at least 30 days, but not more than 6 months, during which they are closely supervised, mentored and evaluated. Evaluations shall be documented and maintained in the employee file." This requirement helps to ensure that new employees are closely supervised and monitored while background check results are pending. To change this process will require both a change in State law and promulgation to change the licensing requirements.

Other.

Describe:

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

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

Minimum Licensing Requirements state the provider must complete the request and submit to DCCECE within 10 days of employment or at the time of application. DCCECE has an electronic submission that has an immediate return on a criminal history, which is available to other states requesting information from Arkansas. Currently, our processing unit has no backlog and our procedure indicates that we will have results and final notification letters to the requesting agency within 30 days.

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

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

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

No

Yes.

Describe other disqualifying crimes and provide citation:

Minimum Licensing Requirements has specific convictions that will prohibit someone from employment for 5 years for misdemeanor offenses and 10 years for some felony convictions. There is a list of permanently prohibiting offenses in the Licensing Requirements as well. These can be located in the Minimum Licensing Requirements in 110.4 and 110.5.

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

The notification letter that is provided to the applicant only indicates that there is a prohibitive offense or conviction. Information regarding the appeal process is provided in this same notification letter. DCCECE maintains a copy of these records; however, the originator of the record is the Arkansas State Police. Because they are the originator, any appeals would be directed to them for consideration.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor.

Lead Agencies can report that no fees are charged if applicable (98.43(f)).

The fees incurred during the background check process are established by the Child Maltreatment Registry and Arkansas State Police. DCCECE has no authority in the fees that are assessed.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

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

N/A

6 Recruit and Retain a Qualified and Effective Child Care Workforce

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

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health

and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

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

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

Since 2004, Arkansas has utilized professional standards and competencies to guide its work. Understanding the importance of continuous review and improvement, the Arkansas Early Childhood Commission/State Advisory Council voted to revise the existing workforce knowledge and competency framework to ensure alignment with current research and recommendations for best practice. DCCECE facilitated a Professional Standards Committee comprised of key representation from the K-12, Head Start, higher education, infant/toddler, after school, and special education areas to conduct the work with support from The National Center on Early Childhood Quality Assurance. Although not prescriptive, the framework specifies targeted staff roles, levels of education, and degrees of professional development that would be expected at each competency

level. The leveled competencies defined within the framework serve to: assist individuals to identify strengths and areas for potential growth; help programs hire, evaluate, and plan meaningful trainings for their staff; allow state-level administrators to identify areas of need and evaluate the effectiveness of professional development initiatives; and provide consumer information for families choosing among early care and education options. In 2017, DCCECE presented the new, *Arkansas Workforce Knowledge and Competencies for Early Care and Education Professionals (WKC)* framework to the Arkansas Early Childhood Commission. DCCECE received public feedback following the release and made adjustments to strengthen the work. The final WKC was adopted in June 2018. DCCECE contracts with universities and education organizations to offer training and technical assistance at no charge to licensed child care providers. Currently, all of the state's contracted training is mapped to the 2004 standards and competencies as required, and it will be aligned with the WKC once it is fully implemented.

-- [Career pathways](#). Describe:

As noted in the National Association for the Education of Young Children (NAEYC) Policy Blueprint, professional standards-such as those described in *Arkansas' Workforce Knowledge and Competencies for Early Care and Education Professionals*-should align and create coherent career pathways for early care and education professionals. These career pathways are essential for early childhood professionals to be able to plan and sequence the attainment of increased qualifications, understand the professional possibilities of achieving increased qualifications, and be appropriately compensated for making continuous progress. Consistent with these goals, Arkansas developed the Traveling Arkansas' Professional Pathways (TAPP) Map, which helps early childhood professionals navigate the progression of credentials and degrees that are aligned to the state's workforce knowledge and competency framework. The TAPP Map describes eight levels of professional development based on training and education and is organized according to the three competency levels of the framework:

Foundation Competency Level

- Foundation 1: Registered 15 clock hours including orientation
- Foundation 2: Registered 30 clock hours

- **Foundation 3: Registered 45 clock hours or 3 semester hours**

Intermediate Competency Level

- **Intermediate 1: CDA or 135 clock hours or 9 semester hours in early childhood education/child development**
- **Intermediate 2: Accredited higher education 18 semester hours in early childhood education/child development**
- **Intermediate 3: Associate degree or 25 semester hours in early childhood education/child development**

Advanced Competency Level

- **Advanced 1: Bachelor's degree in early childhood education/child development or 30 semester hours in early childhood education/child development**
- **Advanced 2: Master's or doctorate degree in early childhood education/child development or 30 semester hours in early childhood education/child development**

Consistent with NAEYC recommendations, the TAPP Map is not intended to be a stand-alone document, but rather is integrated into other components of Arkansas' early care and education system. Indeed, the TAPP Map plays a key role in quality improvement efforts as it is embedded within Arkansas' QRIS (Better Beginnings) system which recognizes the various roles and levels in the career pathways of the TAPP Map. Participation of administrators and staff in the Arkansas Professional Development Registry (or Arkansas Department of Education Registry) is mandatory to participate in Better Beginnings and achievement on the TAPP Map is embedded in Better Beginnings ratings as follows:

Level 1:

- **Administrator must meet requirements for TAPP Foundation 3 or higher, including 21 clock hours of training in program planning/management and/or leadership.**
- **All staff must meet requirements for TAPP Foundation 1 within the first year of employment.**

Level 2:

- **Administrator meets requirements for TAPP Intermediate 1 or higher, including 30 clock hours of training in program planning/management and/or leadership.**
- **All staff meet requirements for TAPP Foundation 1 or higher and at least 50% of teaching staff meet requirements for TAPP Foundation 2 or higher.**

Level 3:

- **Administrator meets requirements for TAPP Intermediate 1 or higher, including 45 clock hours of training in program planning/management and/or leadership.**
- **All staff meet requirements for TAPP Foundation 1 or higher and at least 50%**

- of teaching staff meet requirements for TAPP Foundation 3 or higher.
- Through this integration with the QRIS, increased educational attainment and competency demonstration is encouraged at the program level.

-- **Advisory structure. Describe:**

Coordinating a comprehensive, effective system of preparation and ongoing development and support for all early care and education professionals requires a targeted effort by a specific group of people to focus on this work. As such, the Arkansas Early Childhood Commission convened the State Professional Development Steering Committee (SC). The SC includes diverse representation from early care and education stakeholders including the Arkansas Department of Education, Arkansas Department of Higher Education, the Arkansas Better Chance State Prekindergarten Program, Head Start, home visiting, IDEA, Better Beginnings QRIS, institutions of higher education, Child Care Aware Resource and Referral agencies, education nonprofit organizations and DCCECE. The SC is tasked with reviewing the Arkansas Early Childhood Professional Development System; revising and aligning the System to meet national, research-based standards; and developing an integrated structure to support the increase of high-quality early childhood professionals and QRIS Better Beginnings programs. The comprehensive membership ensure the SC's work is valued and provides for cross-sector, integrated recommendations.

-- **Articulation. Describe:**

DCCECE plans to review and revise, as appropriate, policies around articulation—the transfer of credentials, courses, credits, degrees, etc. from one program to another without loss of credits—in order to fully establish career pathways and build capacity to meet required professional standards. Content provided in postsecondary institutions and licensure tracks will be aligned to the WKC framework, and articulation will be established across career pathways. In 2017, DCCECE collaborated with the University of California at Berkeley's Center for Study of Child Care Employment for the development of the *Arkansas Early Childhood Higher Education Inventory*. The Inventory will provide the state with invaluable information to utilize in its work around Career Pathways and Articulation and will ensure all higher education partners are engaged in the process.

-- Workforce information. Describe:

DCCECE consistently seeks ways to improve its understanding and support of the early care and education workforce. To that end, the state contracted with an institution of higher education to conduct a workforce study. The purpose of the study is to gain knowledge about the field including wages and benefits, education levels, professional development needs, and common barriers and supports to the work. DCCECE anticipates the study findings will be released in late 2018 to early 2019. Results of this study will be utilized to help inform decision-making.

In addition to the workforce study, DCCECE launched an enhanced workforce training registry in 2017 named The Arkansas Professional Development Registry (PDR). All early childhood professionals working in licensed centers, homes and out-of-school time facilities are required to become a member of the PDR. The PDR offers members the ability to locate and register for training opportunities; develop an individual professional development plan; and track their progress against goals.

1. Members see the total number of professional development hours taken on their profile so it is easier to see how many hours are remaining to meet goals
2. Members have the ability to be placed on a "waiting list" for trainings

- If a participant cancels a training, the next person on the waiting list will receive an email asking if they still want to attend the training; if the person declines, the next person on the list will be given the opportunity
- DCCECE contractors have the ability to make data-driven decisions based on the number of people on the waiting list (Example: a contractor may decide to offer additional trainings in the area if there is a long waiting list to meet professional needs)

1. Members have the ability to request trainings not currently available through a "wish list"

- DCCECE will assess requests and might determine a new training is needed

-- Financing. Describe:

DCCECE recognizes the importance of implementing intentional financing strategies to support the state's professional development system. Arkansas' Child

Care Licensing Regulations, Arkansas Better Chance Rules and Regulations, Better Beginnings QRIS standards and Child Care Development Block Grant policies all establish requirements for education and professional development. The state helps early childhood professionals and licensed facilities meet these requirements.

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

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

DCCECE's professional development contractors offer training participants the option of obtaining continuing education units and/or college credit hours when available.

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

All DCCECE contracted training is aligned to the state's professional standards and competencies. (Please see 6.1.1. "Career pathways" and "articulation" for additional details.)

- Other

Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

In 2014, DCCECE expanded the role of the Arkansas Early Childhood Commission to include service as the State Advisory Council on Adopting New Licensing

Requirements. Professional development and training are key components of the state's licensing requirements. The new minimum licensing requirements became effective January 1, 2015.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

All early childhood professionals in Arkansas value a coordinated professional development system based upon research and best practice, which contains high quality professional development opportunities, and allows for the development of career pathways to meet diverse needs of individuals. The Arkansas Early Childhood Professional Development System (AECPDS) will utilize a cooperative approach among all constituents, access existing community and state resources to their best possible use, and involve local communities as appropriate in the decision making process.

- The AECPDS will provide career pathways and opportunities leading to increased compensation commensurate with education and professional development.
- The AECPDS will work to ensure that professional development training can be linked to college credit, which can lead to degrees or other professional credentials.
- The AECPDS will work to encourage, support, and coordinate a professional development lattice that is linked to identified needs and provides opportunities for sequential, comprehensive, ongoing, structured growth.
- The AECPDS will promote accessibility of professional development opportunities across the state to address the needs of diverse early childhood professionals.
- The AECPDS will include procedures for providing feedback about trainers and professional development provided, as well as to promote accountability within the system.
- The AECPDS will support the professional development that is based upon and aligns to the *Arkansas Workforce Knowledge and Competencies for Early Care and Education Professionals*

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

Arkansas' Minimum Licensing Requirements were revised and expanded in 2015 to include standards and training requirements for health and safety, all areas of early childhood development, positive guidance/intervention, and curriculum/lesson planning. As a part of the new licensing requirements, all new staff and volunteers who provide direct care to children must take a basic orientation class prior to providing care that addresses: proper supervision of children, behavioral guidance practices, safe sleep practices for infants, shaken baby syndrome, appropriate responses to crying/fussy infant and child, emergency procedures, mandated reporter training, administering medication, caring for children with special needs/care plans, transportation and care seat safety, and policies regarding release of children to authorized individuals. The introductory, online course also includes the CCDBG health and safety standards and aligns with Arkansas' Early Learning Standards. The standards were revised, expanded and updated in April 2016 to include and reflect current research and evidence based best practice for all developmental areas. Expulsion and suspension policies were developed and

implemented in the CCDF and state preschool funded programs to address behavior guidance for these facilities. These policies were created by a team of interdisciplinary professionals to provide guidance to facilities and reduce the number of suspensions and expulsions of at risk children served by CCDF and state preschool monies.

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

There are no federally recognized Indian tribes in Arkansas today.

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

a) with limited English proficiency

Realizing there is a large population of children and families with limited English proficiency in the state, the Arkansas Bilingual Interpreter Credential in Education Work Group (ABICE) formed. The goal of the group was to develop a professional credential training program for bilingual adults as interpreters in early childhood education. Following are reasons the credential program is needed:

- As identified in the Action Plan of the Arkansas BUILD Team - Advancing Equity in Professional Development Systems - in October 2015, this focus is in response to identified needs for bilingual oral language interpreters in early childhood education and the lack of a credential program in the state.
- An interpreter credential in education is needed to fill a gap - currently there are certifications for medical and legal bilingual language interpreters and sign language interpreters but not for bilingual language interpreters in education.
- Qualified interpreters are important when program staff and families speak different languages.

- **Only qualified adults should be used as interpreters. Children acting as interpreters for their parents do not have the training or vocabulary, are not developmentally prepared for the responsibilities involved, and can result in a change in the family power dynamics.**
- **It is important to be able to rely on the quality and accuracy of the interpretation to gain input from families about the program and for families to accurately share information about their children. Using interpreters that have a professional credential will ensure consistency, professionalism, and trust in the interpreted conversation.**

Benefits of the credential program include:

- **The interpreter credential will employ an established code of ethics for interpreters.**
- **Early childhood educators will gain enhanced cultural awareness, competency and sensitivity through access to a trained bilingual interpreter.**
- **Bilingual early childhood staff members who achieve the interpreter credential will enhance their professional value and could connect to a career lattice.**

Early childhood is often the first experience families have of becoming involved with their child's education, and it sets the stage for future educational success. Families are more likely to be engaged when they are able to communicate easily with staff.

b) who have disabilities

Arkansas' Minimum Licensing Requirements mandate that all licensed facilities ensure appropriate services for children with disabilities and/or special needs, including compliance with IDEA. Arkansas' Minimum Licensing Requirements identifies requirements for licensed providers as listed below.

1400 SPECIAL NEEDS

Individuals with Disabilities Education Act (IDEA):

- **It is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.**
- **It defines a child with Special Needs as: - A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or - A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner**
- **It is specified in Public Law 108-466 §635.16 A-B (IDEA as reauthorized) as: - Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled. - Special classes, separate schooling or other removal of children with disabilities from the**

regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.

All child care facilities are required by IDEA to refer a child with any suspected delays or disabilities to the appropriate lead agency (as determined by the child's age).

1401 Special Needs Requirements

1. All child care facilities shall comply with all applicable provisions as specified in IDEA:
 - a. The facility shall enroll children with special needs without regard to disability. **(Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)**
 - b. Staff shall provide care in the general classroom with children who are not disabled
 - c. The facility shall assist in facilitation of services required to meet the "special needs" of children in the center or in the classroom as specified on the individualized education/individual family service plan.
 - d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process
 - e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).
 - f. The facility shall not charge special service providers for space, accept "gratuities", or payment for allowing special service providers to provide services in their facility.
 - g. The facility is not required to "displace" children or staff to make space available to special service providers.
 - h. In order for a special service provider to provide special services in the facility, the IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.
 - i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.

1402 Infant & Toddler Special Needs Requirements

1. To the maximum extent appropriate, children birth to two (2) years of age shall participate in early intervention services provided in "natural environments."

2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

DCCECE contracts with institutions of higher education and other educational organizations to provide professional development to child care providers. All trainings are required to be aligned with the state's workforce knowledge and competency framework and the state's early learning guidelines. Contractors must identify the training level and target audience for each course. All trainings must be entered in the Arkansas Professional Development Registry. DCCECE utilizes the registry to monitor child care programs and ensure staff meets training requirements.

Arkansas' Minimum Licensing Requirements mandate that all licensed facilities ensure appropriate services for children with disabilities and/or special needs, including compliance with IDEA.

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

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The McKinney-Vento Act seeks to address the challenges that homeless children and youths may face in enrolling, attending and succeeding in school. In section 4.5.1 of the Family Support Procedures Manual, the Lead Agency addresses how we will address homeless families. Homeless families are a priority population for CCDF.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

Arkansas contracts for training that supports vulnerable populations, such as homeless families. Strengthening Families is one example. This training identifies five Protective Factors: Parental Resilience, Social Connections, Knowledge of Parenting and Child Development, Concrete Support in Times of Need, and Social and emotional Competence of Children, that can be used to support all families including those experiencing homelessness.

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

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

The Licensing Unit staff monitor all licensed facilities a minimum of three times per year.

Other

Describe:

N/A

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

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

In 2015, DCCECE implemented new licensing requirements that address the business practices of child care providers. Individuals who are considering opening a child care program are required to attend a pre-licensing training that includes information about the financial aspects of operating a business. All new directors/owners must also attend the following trainings within the first six months: PAS or BAS, Environmental Rating Scale and Director's Orientation. DCCECE contractors are available as needed to provide one-on-one training and technical assistance.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting
- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

DCCECE contracts with institutions of higher education and other education

organizations to provide training and support on the listed topics.

6.3 Early Learning and Developmental Guidelines

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

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

Historically, Arkansas has been a pioneer and leader in developing and implementing high-quality child development and early learning standards. The *Arkansas Early Childhood Education Framework*, the state's first set of standards for three- and four-year-olds, is over 20 years old. When these standards were developed in 1995, Arkansas was one of only ten states to have a document outlining expectations for children's development and learning prior to kindergarten entry. Similarly, Arkansas led the nation in the development of infant and toddler standards, publishing the *Arkansas Framework for Infant and Toddler Care* in 2002. The publication made Arkansas the first state in the country to develop early learning standards for infants and toddlers.

***The Arkansas Child Development and Early Learning Standards: Birth through 60 Months* represents the next generation of Arkansas's child development and early**

learning standards. This new document, published in April 2016, combines and expands the state's two previous sets of standards, to create a seamless birth-through-60 month progression. The format is designed to ensure a strong alignment between the standards for infants and toddlers and those for older children. Equally important, the progression allows infant and toddler early childhood professionals to see more clearly how they are building the foundational skills upon which later skills are developed and acquired. It allows early childhood professionals who work with three- and four-year-olds to understand where children are developmentally, how they got there, and where they are going. The progression also allows teachers of children with developmental delays to know where they are developmentally and what should be expected in the next stage of development.

The new standards draw on the latest research in child development and learning, including emerging research in the area of executive function. *The Arkansas Child Development and Early Learning Standards* supports early childhood professionals in promoting positive interactions and environments for our youngest children. The standards are also responsive to Arkansas's changing demographics, particularly the growing number of children who are dual language learners and are culturally and linguistically appropriate. Developmental progressions that show the process by which children who are dual language learners learn to understand and speak English is demonstrated.

To see child development across a continuum presented in a developmentally and culturally appropriate way is helpful as young children transition from one developmental stage to another. These standards are vertically aligned with the kindergarten language arts and math standards to support the transition from early childhood into K-12 education.

b) [Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.](#)

Understanding that early development and learning is complex and interrelated, *The Arkansas Child Development and Early Learning Standards: Birth through 60 Months* organize the birth-through-60 month age span into five age ranges (birth through 8 months, 9 through 18 months, 19 through 36 months, 37 through 48 months and 49 through 60 months). In addition, the standards are organized into

nine domains of development and learning important for success in school and in life: social and emotional development; cognitive development; physical development and health; language development; emergent literacy; mathematical thinking; science and technology; social studies; and creativity and aesthetics. Each domain is further divided into more specific areas of development or learning called domain components. Each of these domain components includes learning goals that outline the specific areas of development and learning in which children should show progress. The learning goals consist of one or more strands that represent subskills within the learning goal. Within each strand, there is a progression of expectations for what children should know and be able to do at different stages in early childhood. Each step in the progression is called an indicator, which outlines the knowledge or skill that one would expect to see in a child related to that learning goal within a specific age range. It is important to note that because typical child development and learning varies widely from child to child, many indicators span multiple age ranges.

The Arkansas Child Development and Early Learning Standards: Birth through 60 Months were developed over the course of a year by a diverse committee of Arkansas early childhood stakeholders including state agency staff, higher education, early childhood advocates, practitioners, and state experts. In addition, the standards were reviewed by national experts knowledgeable in different areas of child development and learning and different populations of children. Feedback from these experts was integrated into the standards resulting in a quality final document.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

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

Describe:

language development, emergent literacy, mathematical thinking, science and technology, social studies, and creativity and aesthetics

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The *Arkansas Child Development and Early Learning Standards: Birth through 60 Months* was developed through a grant from the W.K. Kellogg Foundation. The standards were created through the hard work of a committee comprised of key representation from the DHS Division of Child Care and Early Childhood Education, the Arkansas Department of Education, the Arkansas Head Start State Collaboration Office, the Arkansas Home Visiting Network, Child Care Aware Resource and Referral, public school, institutions of higher education and education nonprofits. The development of the standards included a review by ten national experts knowledgeable in different areas of child development and learning and different populations of children. The *Arkansas Child Development and Early Learning Standards: Birth through 60 Months* were reviewed and approved by the Arkansas Early Childhood Commission, the State Advisory Council.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

Arkansas first developed early learning and developmental guidelines in 1995. The *Arkansas Child Development and Early Learning Standards: Birth through 60 Months* was issued in 2016. The Standards are integrated throughout Arkansas's early care and education system including child care licensing, professional development, curriculum and assessment, Better Beginnings/QRIS, school readiness and higher education. The DHS Division of Child Care and Early Childhood Education works collaboratively with the Arkansas Department of Education, Arkansas Department of Higher Education, Arkansas Head Start State Collaboration Office and others to ensure the standards address current research. Since the standards are part of an interconnected system, as changes are made in one area, it impacts others.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

Arkansas adopted licensing requirements for out-of-school time facilities in 2015 that support high quality programs for school age children. Directors, assistant directors and site supervisors are required to attend New Director's Orientation, Program Administration Scale, or Youth Program Quality Assessment form B training; and either Environmental Rating Scale or introduction to Youth Program Quality Assessment training within 6 months of employment. In addition, all staff are required to take 15 hours of professional development annually that is appropriate for working with school age children. To further support licensed out-

of-school time facilities, DCCECE contracts with the Arkansas Out of School Network to provide training and technical assistance. In addition, Arkansas adopted the *Core Knowledge and Competencies for Afterschool and Youth Development Professionals developed by the National After School Association and the National Institute of Out-of-School Time* for professionals working with children 6-12 years of age.

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

<https://humanservices.arkansas.gov/about-dhs/dccece>

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

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

Describe how the state/territory's early learning and developmental guidelines are used.

The *Arkansas Child Development and Early Learning Standards: Birth through 60 Months* was created for Arkansas' entire early childhood community including members of the legislature, state administrators, early childhood educators and specialists, professional development providers, parents, and other community partners.

•For the legislature and state administrators, the standards provide the goals for child development and learning for the state's early care and education system. Policies and funding for the system should be decided with these goals for Arkansas's children in mind.

- For administrators and educators, the standards inform the use of curricula and assessments used in early childhood programs to ensure the most important areas of child development and learning are addressed and measured in developmentally appropriate ways. The standards should not be used as an assessment or checklist of knowledge and skills, or as a substitute for a developmentally appropriate, play-based curriculum.
- For professional development providers, the standards should guide the pre-service and in-service offerings to ensure that educators are being equipped with the knowledge and skills that support the development and learning outlined in the standards.
- For parents, the standards can be used to help them understand their own child's development and learning.
- For community partners, the standards help them understand child development and learning, and also provide a common language with which to talk about child development and learning across health, nutrition, and other fields.

7 Support Continuous Quality Improvement

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

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality

Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

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

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

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

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

7.1 Quality Activities Needs Assessment for Child Care Services

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

The DHS Division of Child Care and Early Childhood Education (DCCECE) contracts with the University of Arkansas for Medical Sciences (UAMS) to provide evidence-based scientific review and evaluation services for the state-funded Quality Rating and Improvement System, Better Beginnings. Since 2010, UAMS has provided ongoing scientific support and evaluation for Better Beginnings including:

1. Providing evidence of external validity of Better Beginnings for impacting child outcomes;
2. Implementation evaluation of Better Beginnings, including analysis of barriers to and the use of incentives/grants for promoting participation;
3. Understanding the needs of groups with the lowest levels of participation (Family Child Care, School Age programs, and programs that serve children with special needs);
4. Technical assistance and scientific support to develop higher levels of Better Beginnings;
5. Professional development utilization in support of Better Beginnings;
6. Evaluating the knowledge of trainers and technical assistants throughout the state;
7. Developing a cost analysis of operating differing types of child care and early childhood education programs at various levels of quality, which directly informs financial incentives to participation in the form of quality awards and differential reimbursement of programs;
8. Increasing the availability and quality of infant-toddler slots;
9. Developing and conducting a workforce study with directors; and
10. Conducting market price studies.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

The state contracted for the completion of an early care and education workforce study. Using a combination of foundation and federal funding, our research contractor completed two studies. The first report *Arkansas Workforce Study: Instructional Staff in Child Care & Early Childhood Education, 2017* was released in March 2018, followed by the second, *Arkansas Workforce Study: Program Administrators in Child Care & Early Childhood Education* in July 2018. Both reports can be found linked here: <https://familymedicine.uams.edu/research-and-scholarly-activity/red/research-evaluation/>

Arkansas secured funding from the National Governor's Association to address the high turnover rate in the early care and education workforce. A workforce policy team formed and held its first meeting in July 2018. The team continues to meet.

7.2 Use of Quality Funds

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

Supporting the training and professional development of the child care workforce. If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. Training is offered to practitioners on the social, emotional, physical, and cognitive development of children.

- Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. Training and technical assistance is offered to address behavior management strategies including Conscious Discipline and Powerful Interactions. Moreover, DCCECE convened a group of contractors and other experts to develop a plan for preventing expulsion/suspension in the early years that resulted in the creation of a project called BehaviorHelp which offers providers with a method to seek individualized support. Support ranges from technical assistance to professional development.

- Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful

partners in supporting their children's positive development

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. A variety of family engagement trainings are available, as well as, trainings on diversity, cultural differences/similarities, strategies to support English language learners and inclusion of children with disabilities.

- Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. DCCECE requires all contracted trainings to be aligned to the state's early learning guidelines.

- Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development

Describe:

- Using data to guide program evaluation to ensure continuous improvement

Describe:

DCCECE funds training and technical assistance for several tools that can be used by programs to monitor improvement including the Environmental Rating Scale, Work Sampling, Ounce, and the Program Administration Scale/Business Administration Scale. In addition, the state contracts for an ongoing longitudinal assessment of children from preschool through K-12.

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

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. The state funds trainings, such as Strengthening Families, to support caring for children in areas of concentrated poverty and unemployment.

Caring for and supporting the development of children with disabilities and developmental delays

Describe:

We teach how to recognize delays and encourage use of screening tools such as ASQ.

Supporting the positive development of school-age children

Describe:

DCCECE offers quality, research-based training and professional development through competitively bid contracts with institutions of higher education, nonprofit organizations and government agencies. The state funds the Arkansas Out of School Network to provide training and technical assistance for providers of school-age children.

Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

- Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling**
- Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities**
- Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education**

Other

Describe:

Programs receive one time incentive grants for the QRISas well as tiered reimbursement for post secondary opportunities.

7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

DCCECE provides tiered reimbursement for providers participating in the Better Beginnings system. Through the Division's data systems, we are able to monitor and evaluate program effectiveness and qualifications. The Division monitors the progress of programs moving up in quality on a monthly basis through data retrieved from the DCCECE data systems.

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

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

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

No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.

No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.

Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

The Arkansas Better Beginnings QRIS system is administered statewide through the Department of Human Services, Division of Child Care and Early Childhood Education. www.ARBetterBeginnings.com

Partners provide training, technical assistance, coaching, classroom environment and program administration assessment.

Partners are AR State University Childhood Services www.chs.astate.edu

University of AR for Medical Sciences hccar@uams.edu

UA Early Care & Education Projects: <https://ecep.uark.edu>

UA Cooperative Extension www.uaex.edu/health-living/child-care-providers

AR Child Care Aware Resource and Referral Network www.nwachildcare.org,
www.ccana.org, www.chs.astate.edu, www.childcareawareswa.org,
www.np.edu/childcare-aware

UA College of Family Medicine <http://familymedicine.uams.edu/research-and-scholarly-activity/red/ecep>

Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these

measures.

7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

- Participation is voluntary
- Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

Providers serving children receiving a subsidy must participate in the QRIS system at a minimum of 1-star level. Providers are reimbursed at higher rates for achieving a higher rating.

- Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State prekindergarten or preschool programs
- Local district-supported prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other

Describe:

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

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

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
 - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
 - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
 - Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
 - Programs that meet all or part of state/territory school-age quality standards.
- Other.

Describe:

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

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

Describe:

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

- No
- Yes. If yes, check all that apply
 - One time grants, awards, or bonuses.
 - Ongoing or periodic quality stipends
 - Higher subsidy payments
 - Training or technical assistance related to QRIS.
 - Coaching/mentoring.
 - Scholarships, bonuses, or increased compensation for degrees/certificates
 - Materials and supplies
 - Priority access for other grants or programs
 - Tax credits (providers or parents)
 - Payment of fees (e.g., licensing, accreditation)
 - Other

Describe:

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Data indicating growth of QRIS by measuring percentage of provider participation and facility upward movement.

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

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

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

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

Describe:

N/A

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.

Describe:

N/A

- Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

DCCECE offers quality training and professional development through competitively bid contracts. There is no charge to providers for these trainings.

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

DCCECE offers targeted technical assistance to licensed child care facilities through competitively bid contracts. There is no charge to providers for this service.

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

Early intervention (0-3) under Part C of the Individuals with Disabilities Education Act (IDEA) is administered by the DHS Division of Developmental Disabilities Services (DDS). DCCECE and DDS collaborate to ensure Arkansas's youngest children are served.

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

Caregivers are required to develop and implement written daily plans. Daily plans in upper levels of our QRIS must include all areas of development as defined in the *Arkansas Child Development and Early Learning Standards: Birth to 60 Months*. Administrators are required to complete an Environment Rating Scale training.

Faculty are required to complete a self-evaluation using applicable approved environment rating tools. At our higher levels, programs are required to receive a score.

Administrators in our upper level programs will use Strengthening Families.

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

Minimum licensing requirements include guidelines specific to infant and toddler care.

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

Arkansas' Child Development and Early Learning Standard (CDELS): Birth to 60 months to Other Measurements, is a collection of alignments, continuums, correlations and connections. These documents show the relationships among the CDELS: birth through 60 months and other educational standards and measurement.

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

Arkansas has placed child care consumer education information at:

<https://humanservices.arkansas.gov/about-dhs/dccece/programs-services/consumer-education>

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

Describe:

Arkansas is an Early Head Start-Child Care Partnership Grantee. This partnership has resulted in an increased number of high quality Infant and Toddler slots in

Arkansas.

[Coordinating with child care health consultants.](#)

Describe:

HCCAR is a multi-disciplinary team of health professionals from the University of Arkansas for Medical Sciences (UAMS) who aim to improve the quality of children's health in early child care settings. We offer information and consultation to child care professionals using best practice recommendations in various topics related to the overall well-being of children. The HCCAR goal is carried out in three ways:

1. By providing live and web-based trainings on best practice standards recognized by experts in medicine and behavioral health;
2. By providing free of charge consultations to child care professionals and Child Care Aware agencies on issues related to children's health through a full-time Child Care Health Consultant available from 8-4 p.m.. Monday through Friday;
3. By providing relevant and current health related information that is accessible through this website to give up-to-date information about health and behavioral health issues that are important to your center.

HCCAR is funded through a grant from the Arkansas Department of Human Services. This grant is specific for Child Care Professional Development/Technical Assistance/Training in the State of Arkansas. HCCAR is a collaboration between the Arkansas Department of Human Services, UAMS Department of Pediatrics, and UAMS KIDS FIRST to provide a health resource service for early child care providers with the help of the seven Child Care Aware agencies across Arkansas.

The HCCAR initiative brings together health care professionals, early care and education professionals, child care providers, and families to improve the health and safety of children in child care.

[Coordinating with mental health consultants.](#)

Describe:

DCCECE has developed a program called BehaviorHelp. BehaviorHelp is a statewide program used to assist child care providers in supporting children who experience

challenging behaviors. The purpose of the program is to reduce suspensions and expulsions of young children and enhance their social and emotional development. We have contracted with a mental health professional group called Project Play.

Other

Describe:

N/A

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

DCCECE has used its data based systems to monitor and evaluate the quality of services to programs serving infants and toddlers. In addition, DCCECE reviews state data on an ongoing basis and routinely instructs contractors to amend activities to meet identified needs.

7.6 Child Care Resource and Referral

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

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

DCCECE contracts with five agencies to operate Child Care Aware Resource and Referral agencies. Each contractor is required to submit detailed monthly reports to the state and to evaluate the effectiveness of their services. DCCECE monitors all contracts for fiscal responsibility, quality and accessibility. Contractors, with input from the state, routinely adjust their services to meet provider needs.

7.7 Facilitating Compliance With State Standards

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

DCCECE provides technical assistance and training at no cost to the provider in order to help them to comply with all minimum licensing standards and other quality initiatives. DCCECE has contractors that provide these on site technical assistance / training visits as needed.

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

- No
- Yes. If yes, which types of providers can access this financial assistance?

- Licensed CCDF providers
- Licensed non-CCDF providers
- License-exempt CCDF providers
- Other

Describe:

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

N/A

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

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

Program monitoring and review for compliance with QRIS standards, qualifications and professional development requirements, assessment of classroom environment using ERS and YPQA, assessment of management practices using PAS and BAS.

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

Data indicating growth of QRIS by measuring percentage of provider participation and facility upward movement.

7.9 Accreditation Support

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

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes**

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

Child care providers that are accredited through national accreditation systems are offered full or partial reciprocity for QRIS. Providers are given a one-time cash award upon certification.

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.**

Describe:

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

- No, but the state/territory is in the accreditation development phase

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

- No, the state/territory has no plans for accreditation development

7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Data indicating growth of QRIS by measuring percentage of provider participation and facility upward movement.

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

Health: DCCECE Child Care Licensing & Accreditation has extensive Minimum Licensing Requirements regarding health issues. Providers are required to share information with families regarding medical homes for children, and to comply with all aspects of IDEA, including assisting in facilitation of services required to meet the special needs of the child.

Mental health: Providers are mandated to refer children for services as needed.

Nutrition: Training is provided by the Division on how to meet these guidelines.

Physical activity: DCCECE Child Care Licensing & Accreditation has Minimum Licensing Requirements that require 30 minutes per day of moderate to vigorous physical activity. The contractors have developed training that supports providers in this area.

Physical development: Providers are required to share information with families regarding medical homes for children, and to comply with all aspects of IDEA, including assisting in facilitation of services required to meet the special needs of the child.

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

All CCDF participants are required to participate in Better Beginnings. DCCECE evaluates the process and monitors the number of participants, by star level, on a monthly basis. Contractors work closely with providers to assist them in achieving and maintaining higher quality.

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

The Division provides training and targeted technical assistance through professional development contracts in order to ensure that children are cared for in safe, nurturing and academically rich environments and environments where licensees are prepared for emergency situations. Training in specific areas are required of all licensed and registered child care providers, as follows:

Directors and Assistant Directors/Site Supervisors shall obtain fifteen (15) clock hours in early childhood education each year. Training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry, or Department of Education or Department of Higher Education approved.

Documentation of training shall be maintained and available for review.

- 1. Topics appropriate for continuing early childhood education shall include, but are not limited to the following:**
 - Child growth and development**
 - Nutrition and food service**
 - Parent communication and involvement**
 - Curriculum development and implementation Developmentally appropriate practice and learning environments**
 - Behavior guidance and positive interaction**
 - Emergency care and first aid**
 - Program planning, management and leadership of early childhood programs**

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

Communication and outreach to providers and families through public relations and media includes conferences, television appearances, online publications, radio interview, monthly newsletters, news releases, a proclamation, YouTube videos, social media and blog posts. Family communication and outreach for families is in early childhood development in literacy, math, science and value of quality learning environment. Provider communication and outreach covers the importance of earning, maintaining, and increasing, QRIS status and highlighting best practices.

Data indicating growth of QRIS by measuring percentage of provider participation and facility upward movement. Data is collected indicating provider and parent outreach and traffic growth to online resources and social media.

8 Ensure Grantee Program Integrity and Accountability

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

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

program integrity and accountability apply to:

-- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF

-- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

Train on policy manual

Describe:

DCCECE staff are trained on the policy manual. Updated manuals are posted on the DCCECE website and any updates or changes to the policies are shared with other agencies.

Train on policy change notices

Describe:

Policy changes are shared with all DCCECE staff and agencies. In addition, DCCECE provides online and quarterly provider trainings for CCDF providers and new staff. Annual refresher trainings are required to continue participation on the program

Ongoing monitoring and assessment of policy implementation

Describe:

Program Administrators will be reviewing processes and procedures quarterly to ensure program implementation.

Other

Describe:

N/A

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

Verifying and processing billing records to ensure timely payments to providers

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) has systems in place to run reports that flag errors and those errors are reviewed by administrative staff. DCCECE staff review attendance and billing records to ensure the integrity of the the use of CCDF funds.

Fiscal oversight of grants and contracts

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) has a director of finance that monitors all expenditures of CCDF funds. Additionally, the Department of Human Services has a team of Financial Shared Services to work on federal reporting and other federal requirements related to finance.

Tracking systems to ensure reasonable and allowable costs

Describe:

The agency has policies in place including legislative audits.

Other

Describe:

N/A

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

Conduct a risk assessment of policies and procedures

Describe:

DHS requires the Division to conduct an annual risk assessment of policies and procedures.

Establish checks and balances to ensure program integrity

Describe:

DCCECE works closely with DHS Office of Program Integrity division to ensure program integrity.

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

CCDF Program Coordinators are required to review Family Support Specialist (FSS) case records quarterly to ensure accuracy in eligibility determination.

Other

Describe:

N/A

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review

process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

- Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe

The Division of Child Care and Early Childhood Education IT team has the ability to run reports to assess intentional program violations.

- Run system reports that flag errors (include types).

Describe:

The Division of ChildCare and Early Childhood Education (DCCECE) IT team has the ability to run reports to potentially flag system errors. The reports can identify errors such as duplicate billing, billing for children not in attendance, billing for seven (7) days in a row, etc. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

- Review enrollment documents and attendance or billing records

Describe:

TheDivision of Child Care and Early Childhood Education (DCCECE) IT team has the ability to run reports to assist with reviewing billing and attendance information. Information from the reports can be compared to provider attendance and billing records. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) Program coordinators are responsible for conducting random case reviews to ensure quality of service and compliance. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

Audit provider records.

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) works with the Office of Program Integrity to conduct provider audits. Random facilities are audited each month. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

Train staff on policy and/or audits.

Describe:

The Division plans to implement training for staff based on reports received.

Other

Describe:

N/A

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

N/A

- [Run system reports that flag errors \(include types\).](#)

Describe:

The Division of ChildCare and Early Childhood Education (DCCECE) IT team has the ability to run reports to potentially flag system errors. The reports can identify errors such as duplicate billing, billing for children not in attendance, billing for seven (7) days in a row, etc. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

- [Review enrollment documents and attendance or billing records](#)

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) IT team has the ability to run reports to assist with reviewing billing and attendance information. Information from the reports can be compared to provider attendance and billing records. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

- [Conduct supervisory staff reviews or quality assurance reviews.](#)

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) Program coordinators are responsible for conducting random case reviews to ensure quality of service and compliance. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

- [Audit provider records.](#)

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) works with the Office of Program Integrity to conduct provider audits. Random facilities are audited each month. If errors are identified, they are investigated and can result in a provider/client overpayments, corrective action and/or termination for the Child Care Assistance program.

Train staff on policy and/or audits.

Describe:

N/A

Other

Describe:

N/A

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

N/A

Run system reports that flag errors (include types).

Describe:

N/A

Review enrollment documents and attendance or billing records

Describe:

N/A

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

The Division of Child Care and Early Childhood Education (DCCECE) Program coordinators are responsible for conducting random case reviews to ensure quality of service and compliance. If errors are identified, they are investigated and can result in additional staff training.

Audit provider records.

Describe:

N/A

Train staff on policy and/or audits.

Describe:

N/A

Other

Describe:

N/A

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Improper payment of \$20.00 or more and less than \$500.00 will be handled by DCCECE Family Support Unit for participants and overpayments resulting in suspected fraud in excess of \$500 will be referred to the Office of Payment and Integrity for investigation.

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Coordinate with appropriate external agencies to collect improper payment

Recover through repayment plans.

Describe:

Repayment plan are generated by DHS Finance

Reduce payments in subsequent months.

Describe:

Recover through state/territory tax intercepts.

Describe:

State Tax intercepts are set up by Department of Finance and Administration

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

DHS has establish the division of Office of Payment Intrgrity and Audit to investigate improper payments. If improper payments are identified, program coordinator will contact DCCECE.

Other

Describe:

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Improper payment of \$20.00 or more and less than \$500.00 will be handled by DCCECEFamily Support Unit for participants and overpayments resulting in

suspected fraud in excess of \$500 will be referred to the Office of Payment and Integrity for investigation.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Coordinate with Department of Finance and Administration to collect improper payment

- Recover through repayment plans.

Describe:

Repayment plan are generated by Department of Finance and Administration

- Reduce payments in subsequent months.

Describe:

- Recover through state/territory tax intercepts.

Describe:

State Tax intercepts are set up by Department of Finance and Administration

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

DHS has establish the division of Office of Payment Integrity and Audit to investigate improper payments. If improper payments are identified, program coordinator will contact DCCECE. .

- Other

Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Improper payment of \$20.00 or more and less than \$500.00 will be handled by DCCECE Family Support Unit for participants and overpayments resulting in suspected fraud in excess of \$500 will be referred to the Office of Payment and Integrity for investigation.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

Coordinate with Department of Finance and Administration to collect improper payment

- Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

Repayment plan are generated by Department of Finance and Administration

- Reduce payments in subsequent months.

Describe:

- Recover through state/territory tax intercepts.

Describe:

State Tax intercepts are set up by Department of Finance and Administration

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

DHS has establish the division of Office of Payment Intrgrity and Audit to investigate improper payments. If improper payments are identified, program coordinator will contact DCCECE. .

Other

Describe:

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

- Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

DHS may impose sanctions for a client or provider for fraudulent misrepresentation or Intentional Program Violation. DHS will use all means available through policy or the legal system to recoup any monies that have been determined to be owed by a client or provider. Refusal of a client to cooperate in any fraud investigation will result in case closure and termination of benefits. Any Participant who refuses to cooperate in a DHS investigation will be subject to the termination of their CCDF Participant Agreement and exclusion from participation in DHS programs. The following actions may be taken against a Casehead or Participant when it is determined that there has been one or more instance of fraud. Disqualification may be imposed on a Casehead or Participant in addition to requiring repayment of the amount of the child care payment for which they were ineligible to receive. Rights to a case review whenever an application is denied, or adverse action is taken, the casehead shall be informed in writing of the decision and the right for a review of that decision. The notice must state that the case head has ten (10) days from the date of the Notice of Action in which to submit a request for Internal Review of the decision. The Internal Review and Appeal Process are outlined in this procedure manual.

Please see the Arkansas CCDF Procedure Manual for more details.

https://humanservices.arkansas.gov/images/uploads/dccece/FSU_Procedural_Manual_09-1-18.pdf

Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe:

DHS may impose sanctions for a client or provider for fraudulent misrepresentation or Intentional Program Violation. DHS will use all means available through policy or the legal system to recoup any monies that have been determined to be owed by a client or provider. Refusal of a client to cooperate in any fraud investigation will result in case closure and termination of benefits. Any Participant who refuses to cooperate in a DHS investigation will be subject to the termination of their CCDF Participant Agreement and exclusion from participation in DHS programs. The following actions may be taken against a Casehead or Participant when it is determined that there has been one or more instance of fraud. Disqualification may be imposed on a Casehead or Participant in addition to requiring repayment of the amount of the child care payment for which they were ineligible to receive. Rights to a case review whenever an application is denied, or adverse action is taken, the casehead shall be informed in writing of the decision and the right for a review of that decision. The notice must state that the case head has ten (10) days from the date of the Notice of Action in which to submit a request for Internal Review of the decision. The Internal Review and Appeal Process are outlined in this procedure manual.

Please see the Arkansas CCDF Procedure Manual for more details.

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Prosecute criminally.

Describe:

Other.

Describe:

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting

a time-limited waiver extension.

Appendix A.1: In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b))

Describe the provision from which the state/territory seeks relief.

At this point compliance would require the Arkansas State Police, who are mandated by Arkansas law to conduct these checks, to change their system from a name search to a fingerprint basis at significant cost. We are mandated by state law to run our criminal background checks through the Arkansas State Police.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to conduct criminal registry background checks based on a name search. We will continue to pursue answers on this topic.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to conduct criminal registry background checks based on a name search.

Appendix A.4: National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b))

Describe the provision from which the state/territory seeks relief.

We are seeking a waiver to have the implementation date extended in order for the public hearing and final phases of promulgation to occur.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The background check law was changed in the 2017 legislative session, requiring all employees to submit to FBI fingerprint checks as part of the criminal background check process. These rules are being added to the Minimum Licensing Requirements. DCCECE is in the promulgation process and is currently in the public comment phase of the process. Background checks are done the

same for all provider types.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
We will continue our current process for background checks.

Appendix A.5: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a))

Describe the provision from which the state/territory seeks relief.

Currently, NSOR is not an independent check that occurs. It is, however, a portion of the FBI background check process. At this time the requirement for NSOR would take a Promulgation change to the current rule. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
We will continue to use our current background check process while seeking resolution.

Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b))

Describe the provision from which the state/territory seeks relief.

Currently, NSOR is not an independent check that occurs. It is, however, a portion of the FBI background check process. At this time the requirement for NSOR would take a Promulgation change to the current rule. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to use our current background check process while seeking resolution.

Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))

Describe the provision from which the state/territory seeks relief.

Legislation was passed in the 2017 Legislative Session requiring criminal registry background checks for all child care providers and staff. Through NCIC, the criminal registry information from all participating states will be available and used to determine employment in child care within Arkansas. We are anticipating implementation of this requirement to occur late 2018 or early 2019.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue using our current background check process until implementation occurs.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue using our current background check process until implementation occurs.

Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))

Describe the provision from which the state/territory seeks relief.

Legislation was passed in the 2017 Legislative Session requiring criminal registry background checks for all child care providers and staff. Through NCIC, the

criminal registry information from all participating states will be available and used to determine employment in child care within Arkansas. We are anticipating implementation of this requirement to occur late 2018 or early 2019.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue using our current background check process until implementation occurs.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue using our current background check process until implementation occurs.

Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))

Describe the provision from which the state/territory seeks relief.

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to use our current background check process while seeking resolution.

Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))

Describe the provision from which the state/territory seeks relief.

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to use our current background check process while seeking resolution.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))

Describe the provision from which the state/territory seeks relief.

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to use our current background check process while seeking resolution.

 **Appendix A.12:** Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))

Describe the provision from which the state/territory seeks relief.

Currently, we are seeking guidance from our FBI field agent and our Office of Chief Counsel to develop an action plan to best meet the needs of this requirement. We are seeking a waiver to extend the implementation date in order to continue seeking counsel on how to best meet this requirement.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue to use our current background check process while seeking resolution.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue to use our current background check process while seeking resolution.

 **Appendix A. 13:** New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9)

Describe the provision from which the state/territory seeks relief.

We are seeking a waiver to have the implementation date extended in order for the public hearing and final phases of promulgation to occur. We are seeking a waiver for this requirement. Legislation was passed in the 2017 Legislative Session requiring FBI fingerprint background checks for all child care providers and staff. Promulgation is underway to incorporate this into the Minimum Licensing Requirements. It is anticipated that implementation of this process will occur in late 2018 to early 2019. However, there is a secondary issue that will also need to be included in the waiver request. Currently, both the Child Care Licensing Act and our promulgated licensing requirements allow a provider to fully utilize a new employee as long as they initiate the required background checks within ten (10) days of employment. To change this process will require both a change in State law and promulgation to change the licensing requirements.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

We will continue our current process for background checks.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

We will continue our current process for background checks.