Child Care and Development Fund (CCDF) Plan
For

Missouri
FFY 2014-2015

PART 1
ADMINISTRATION

1.1 Contact Information

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

1.1.1 Who is the Lead Agency designated to administer the CCDF program? Identify the Lead Agency and Lead Agency's Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Effective Date: 01-OCT-13

Name of Lead Agency: Department of Social Services

Address of Lead Agency: P.O. Box 1527, Jefferson City, MO 65102-1527

Name and Title of the Lead Agency's Chief Executive Officer: Brian Kinkade, Acting Director

Phone Number: (573)751-4815

Fax Number: (573)751-3203

E-Mail Address: Brian.D.Kinkade@dss.mo.gov

Web Address for Lead Agency (if any): www.dss.mo.gov

1.1.2 Who is the CCDF administrator? Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.** (§§98.16(a) and (c)(1))

 a) Contact Information for CCDF Administrator:

Effective Date: 01-OCT-13

Name of CCDF Administrator: Cindy L. Burks

Title of CCDF Administrator: Child Care Program Administrator, Children¿s Division

Address of CCDF Administrator: P.O. Box 88, Jefferson City, MO 65103-088

Phone Number: (573) 751-6793

Fax Number: (573)526-9586

E-Mail Address: Cindy.Burks@dss.mo.gov

Phone Number for CCDF program information
(for the public) (if any): (573) 522-1385

Web Address for CCDF program
(for the public) (if any): http://www.dss.mo.gov/cd/childcare/index.htm

Web Address for CCDF program policy manual
(if any): http://www.dss.mo.gov/fsd/iman/childcare/cctoc.html

Web Address for CCDF program administrative rules
(if any): http://www.sos.mo.gov/adrules/csr/current/13csr/13csr.asp

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

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Address of CCDF Co-Administrator:

Phone Number:

Fax Number:

E-Mail Address:
Description of the role of the Co-Administrator:

1.2 Estimated Funding

1.2.1 What is your expected level of funding for the first year of the FY 2014 - FY 2015 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

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FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching): $
 $101,770,676
Federal TANF Transfer to CCDF: $ $23,000,000
Direct Federal TANF Spending on Child Care: $ 00
State CCDF Maintenance-of-Effort Funds: $ $16,548,755

State Matching Funds: $ 20,400,000

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

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

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☐ N/A here

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

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

 Early Childhood and Development fund (estimate $2.67 million) and General Revenue (estimated $35.3 million.)

If known, identify the estimated amount of public funds the Lead Agency will receive: $ 38 million
☐ Private Donated Funds to meet the CCDF Matching Fund requirement. Only private received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:
☐ donated directly to the State?
☐ donated to a separate entity(ies) designated to receive private donated funds?
If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact and type:

If known, identify the estimated amount of private donated funds the Lead Agency will receive:
☐ State expenditures for Pre-K programs to meet the CCDF Matching Funds requirement.

If checked, provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%):

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement:

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

☐ State expenditures for Pre-K programs to meet the CCDF Maintenance of Effort (MOE) requirements.

If checked,

☐ The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1).

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

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

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement:

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

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

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Infant/Toddler Targeted Fund $2,000,000	The lead agency uses the Infant/Toddler targeted funds to increase the reimbursement rates for Infant/Toddler care to eligible child care providers.	The purpose is to support infants/toddlers accessing licensed/regulated care. By increasing rates for infant and toddler care, we have increased the number of infants and toddlers accessing licensed/regulated care over the years. Infants and toddlers are benefiting from lower staff to child ratios, increasing their safety while in child care arrangements, and providing a more nurturing and stimulating environment.	Strategies include a continued effort to encourage new parents to utilize licensed/regulated child care settings for their infants/toddlers. Targeted outcomes include a continued increase in the number of infants and toddlers receiving subsidy licensed/regulated settings.

School-Age/Child Care Resource and Referral Targeted Funds 331,105	**Before/Afterschool programs within local education agencies:** Grants to establish or enhance before/afterschool programs for children less than 13 years of age. Awardees must become licensed with the Department of Health and Senior Services within one year of award. Technical assistance must be provided to grantees which shall include site visits and consultation regarding: health and safety, child nutrition, accreditation process, and developmentally appropriate programming. **School Age Resource and Referral:** Technical assistance, as well as conference opportunities through Department of Elementary and Secondary Education (DESE) ten regions that focus on before/afterschool childcare for school age children.	Improve the quality of care received by all children, specifically children receiving child care subsidy.	The workforce will be better prepared to serve young children and youth. More subsidized children in higher quality care. This will be measured by the number of subsidized children in licensed and/or accredited care.

Quality Expansion Targeted Funds $3,500,000	**Missouri Child Care Resource and Referral Network :** Assistance for all families, regardless of income or location, as they select child care; to improve the quality of child care and early learning programs; and to partner with business and civic leaders to make child care safe and enriching for children. **Educare :** Educare is an initiative providing resources, technical assistance, and training opportunities targeting family child care programs. Services are free or at reduced costs to state subsidized child care and early learning programs. **OPEN:** A registry for early childhood and youth professionals. This includes education and training information on professionals who work in the early childhood and youth education field and for trainers within that field.	Improve the quality of care received by all children, specifically children receiving child care subsidy.	The workforce will be better prepared to serve young children and youth. More subsidized children in higher quality care. This will be measured by the number of subsidized children in licensed and/or accredited care.

| Quality Funds (not including Targeted Funds)

$8,104,671 | **Early child care with local education agencies:** Competitive grant awards to local education agencies that submit applications to establish early childhood programs serving children 3-5. These awardees must become licensed with the Department of Health and Senior Services within one year of award. Technical assistance must be provided to grantees which shall include site visits and consultation regarding: health and safety, child nutrition, accreditation process, and developmentally appropriate programming.

Before/Afterschool programs within local education agencies: Grants to establish or enhance before/afterschool programs for children less than 13 years of age. Awardees must become licensed with the Department of Health and Senior Services within one year of award. Technical assistance must be provided to grantees which shall include site visits and consultation regarding: health and safety, child nutrition, accreditation process, and developmentally appropriate programming.
Child Development Associate Systems : Provide Child Development Associate Credential (CDA) training in area vocational schools.
Parentlink: A WarmLine that provides quality parenting information, materials, and other resources, such as research-related literature, educational brochures, and lending library items, and services, such as outreach activities and | Improve the quality of care received by all children, specifically children receiving child care subsidy. | The workforce will be better prepared to serve young children and youth. More subsidized children in higher quality care. This will be measured by the number of subsidized children in licensed and/or accredited care. |

	support groups to proactively strengthen and support Missouri's families and communities. **Child Care Health and Safety Consultation:** Local public health agencies' health professionals to provide consultation and/or education to all child care providers related to health issues in child care settings, and health promotion activities to children in child care. **Monitoring and Compliance:** Child care sanitation inspections, personal services and fringe benefits, expense and equipment, and indirect costs. This includes staff costs to conduct inspections and complaint investigations for all licensed and license-exempt child care facilities and monitoring of all grant funded contracts associated with CCDF. **Child Care Licensure Inspection Software:** Supports upgrades to the Department of Health and Senior Services software used by Child Care Facility Specialists to document the results of facility inspections and to provide this information to parents via the internet. **Early Head Start:** To increase the quality and capacity of childcare for Missouri's birth to age three population. Early Head Start programs partner with a wide range of providers in the community including both public and private, as well as faith-based, family child care homes, group homes, and centers, to create a variety of quality settings from which parents may choose. **Accreditation:** The lead agency provides a rate differential of 20% to accredited child care providers over their base		

	rate. **Special Needs:** The lead agency provides a rate differential of 25% to child care providers who serve special needs children.		

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

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

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

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☑ No, the Lead Agency will not distribute any quality funds directly to local entities

☐ Yes, all quality funds will be distributed to local entities

☐ Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities

☐ Other.
Describe:

1.3 CCDF Program Integrity and Accountability

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

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

Describe:

Claims and Restitution System(CARS):The CARS system is an integrated system for processing child care provider claims. The system generates notifications, called demand letters, and promissory notes to providers of initial claims. Also, the system sends monthly bills to providers. This system has assisted in streamlining program efficiency and increase accountability in the collection of overpayments.

Payment and Eligibility System Enhancements: DSS has enhanced system edits to the automated child care eligibility and payment systems for Children's Division and Family Support Division staff. These edits allow the system to identify and block any child authorization that exceeds the allowed number of unrelated children to a license exempt family home provider.

The automated eligibility system limits the number of full time/daytime units of care authorized for a child over the age of seven, which prevents a provider from claiming a full month's reimbursement for children attending school.

The Missouri Department of Health and Senior Services is responsible for child care licensing and the Child and Adult Care Food Program. DSS works closely with both programs to identify and investigate potentially fraudulent situations. DSS has bi-monthly meetings with both agencies to review payment issues and/or fraud situations. This group also discusses policy implications that may impact each others programs.

DSS has a Child Care Provider Relations Unit (CCPRU) which is responsible for accepting and processing child care registration information on potential child care providers in the state, processing child care payments made through the Children's Division's and the Family Support Division's payment systems, facilitating payment resolutions on behalf of child care providers, and working with local CD and FSD offices on child care authorization problems. The Child Care Provider Relations Unit randomly reviews subsidized child care providers each month. The review process includes a review of invoicing and attendance recording practices. Results and recommendations from these reviews are provided to the child care subsidy administrator for corrective action. Child care providers may be referred and/or mandated to attend Subsidy Orientation training, if necessary.
Identification procedures include the following:

• Conduct random billing reviews by CCPRU of any participating provider in the subsidy program; and
• Random license capacity checks of licensed facilities.

Collection of improper payments: Primary method of collection is by recoupment, which is handled by our integrated system to ensure proper collection and reporting of income at the end of the tax year. If the provider no longer receives reimbursement from the state, direct payments are accepted by DSS.

Fraud: The Department of Social Services, Division of Legal Services/Welfare Investigation Unit investigates referrals from staff to determine when CCDF funds were fraudulently received and processes these actions through internal polices, which sometimes results in referrals for legal litigation. Missouri developed a Child Care Fraud pamphlet which is made available to the public. Missouri also has implemented online fraud reporting for both clients and providers. To view this online reporting go to https://dssapp3.dss.mo.gov/ChildCareFraud/

Case Review System:Missouri has implemented a case review system. This program enhancement allows for child care cases to be read on regular basis by supervisors. Importantly, the data from this system will allow for programmatic improvements to be made based on solid case work data.

Child Care Compliance Review Team (CCRT):   The Children's Division is working with the Division of Finance and Administrative Services (DFAS) to implement a Child Care Compliance Review Team (CCRT) to conduct both desk and on site reviews of child care providers. The proposed team will have staff to perform data mining, establish risk assessments, conduct reviews and to follow through with implementation of corrective actions to address findings.

1.3.2. Describe the processes the Lead Agency will use to monitor all sub-recipients.
Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements. (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient and vendor** (http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010). The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

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Describe:

DSS reserves the right to use funding, in addition to the quality funding contracted to DHSS and DESE, for such projects or pilots that support the activities of the state's child care programs in the course of implementing family self sufficiency and to enhance the quality of child care for Missouri's families. Examples of programs currently supported are ongoing grants to the Missouri Child Care Resource and Referral Network d.b.a. Child Care Aware® of Missouri, Educare, and our state professional development system OPEN (Opportunities in a Professional Educational Network). The above listed grants are monitored, along with all other quality grants in accordance with the below contract monitoring policy.

The Departments of Health and Senior Services and Elementary and Secondary Education will monitor the individual grants awarded from the quality funding each department receives from DSS. Appeals, hearings and/or complaints will be handled at the DESE and DHSS level with the final appeal process to be the responsibility of DSS.

The Department of Social Services monitors the terms of the agreements with DHSS and DESE. The monitoring activities entail, at a minimum, an annual accounting of activities as defined in the respective Memoranda of Understanding with each department. Additionally, outcomes and benchmarks are measured, on an annual basis, as they relate to each department's state strategic plan.

Contract Monitoring Policy

The Children's Division, Early Childhood and Prevention Services Section has responsibility for monitoring all of the contracts within the section. Contract monitoring happens in a variety of ways within the policies described below.

Monitoring Frequency:
Desk monitoring will be done on a continual basis.

Contracts that are renewed annually will be monitored on site according to the amount as listed below:

• $500,000 and up monitored annually
• $250,000 - $500,000 monitored every 2 years
• All others every 3 years

Other exceptions will be made as circumstances arise to trigger the need for an onsite monitoring visit. These triggers may include but are not limited to the following:

• referred as at risk from another division or partner agency,
• desk monitoring findings, or
• result of a corrective action.

Desk Monitoring:

• Invoices – Staff review these documents and supporting documentation for accuracy to assure compliance with the approved contracts and budgets and follow up with contractors when clarification, corrections or changes need to be made prior to approving for payment.
• Expenditure reports – Staff review these documents and supporting documentation for accuracy to assure compliance with the approved contracts and budgets and follow up with contractors when clarification, corrections or changes need to be made.
• Programmatic reports – Staff review these documents to ensure service deliverables are being met in accordance with the approved contract. Follow up with contractors is done when there is a need for clarification or the report has triggered a need for technical assistance to the contractor either by our staff or through an outside resource.
• Audits – Audits are submitted once per year or as requested by the state agency, reviewed by staff and sent to the Division of Finance and Administrative Services (DFAS) for review. If necessary they may request further documentation to account for expenditures or an on-site review may be required by state agency staff.
• Communication – Review and share contracts/provider lists/information with other divisions and partner agencies to maximize resources.
• Budget revisions/amendments – Staff review contractor requests for revisions/amendments to ensure compliance with the approved contract and submitted budget. The state agency may request budget revisions/amendments as a result of any of the above.
• System Access – Staff review information in systems within CD and with other agencies. These may include MOHSAIC (child care licensing), FACES, and/or FAMIS. These systems should be checked for all applicable programs at the beginning of the contract year, prior to monitoring, and at the end of the contract year with printouts from the systems filed by date.

On-Site Monitoring:

Preparation:

- Review all materials from desk monitoring for the period being monitored.
- Schedule on-site reviews with contractors giving a minimum of 30 days notice unless circumstances indicate immediate monitoring.
- Complete and submit monitoring schedule to supervisor every 6 months.
- Send monitoring tool, notice, request any information that is needed from the contractor, or specific records to be checked prior to the monitoring. (This could include but is not limited to staff names and Social Security Numbers) Notification will be sent to the contractor on letterhead by e-mail, mail, or fax.
- Request any information from other divisions or partner agencies. (This could include but is not limited to scheduling a time for a child care license review, or results of a compliance review, Missouri Professional Development Registry information, Secretary of State's Office business compliance, etc.)
- Provide contractor consultation within one week prior to the on-site monitoring.

On-Site Activities:

- Travel to site.
- Tour facility.
- Conduct entrance overview/discussion.
- Interview appropriate staff (this could include sub-contractors) on how the program works in that community.
- Complete the programmatic and fiscal monitoring tool and review supporting documentation with appropriate staff.
- Compare expenditure reports to ledger kept on site.
- Staff may decide to tour a partner facility or sub-contractor facility while in the area.
- Conduct exit discussion/overview of the monitoring.
- Travel back to base.

Follow-Up:

- Gather additional information as identified by the monitoring.
- Share any identified concerns with other divisions and relevant partner agencies.
- Contractors in good standing will receive official notice within 30 days on letterhead by e-mail, mail, or fax. Contractors requiring a corrective action plan must be notified within 10 business days of the monitoring.

Corrective Action:

- Corrective action plans must be received from the contractor within 10 business days of the request. Upon approval of the corrective action plan by the state agency, the contractor will update the state agency bi-weekly with progress. The correction must be completed within the approved timeframe. If this is not completed the state agency will discuss identified obstacles to determine whether or not an additional extension is warranted.

- On site monitoring verifying corrections were made will occur within 90 days of correction being completed, unless desk monitoring of supporting documentation can verify the correction.

- The state agency will submit a letter on letterhead requesting funding be returned if it is determined that the contractual requirements will not be met. The returned funding amount will be dependent upon the funding award and actual services provided during the reviewed contract period.

- Returned funding will be tracked and forwarded to DFAS to be credited to appropriate fund code.

- On site monitoring will occur in the next fiscal year for anyone who successfully completes a corrective action plan in the current year.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

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Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))	☑	☑
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))	☐	☐
Run system reports that flag errors (include types)	☐	☐
Review of attendance or billing records	☑	☑
Audit provider records	☑	☑
Conduct quality control or quality assurance reviews	☐	☐
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	☐	☐
Conduct supervisory staff reviews	☑	☑
Conduct data mining to identify trends	☐	☐
Train staff on policy and/or audits	☑	☑
Other. Describe	☐	☐
None	☐	☐

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

Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))
The Child Care Assistance data is housed in the same information system as the TANF program. Data is shared across program lines as needed to support and improve program outcomes. Information is shared with the CACFP program as it is relates to providers referred to the Welfare Investigation Unit for fraud, provider payment, child care authorizations and claimed attendance.

Review of attendance or billing records
Child care provider records are reviewed during internal audits and fraud investigations. Child Care Provider Relations Unit (CCPRU) staff review attendance and billing records for accuracy for registered family home providers. CCPRU staff may request attendance records at anytime from a contracted provider to review payment accuracy.

Audit provider records
Child care provider records are reviewed during payment processing by Child Care Provider Relations staff for billing accuracy.

Train staff on policy and/or audits
Staff are provided case reference guides, online child care training and in-person training which supports program integrity and accountability. Prior to audits, staff are informed of audit expectations and provided a file checklist prior to submission. Audit findings are shared with staff through various communications.

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

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error? Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

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Strategy	UPV	IPV and/or Fraud	Administrative Error

Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount: $	☐	☐	☐
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe: The lead agency meets bi-monthly with the Department of Health and Sneiour Services Section for Child Care Regulation and the Child and Adult Care Food Program. Participating agencies exchange information on provider issues that impact program integrity.	☑	☑	☐
Recover through repayment plans	☑	☑	☑
Reduce payments in the subsequent months	☑	☑	☑
Recover through State/Territory tax intercepts	☐	☐	☐
Recover through other means. Describe:	☐	☐	☐
Establish a unit to investigate and collect improper payments. Describe composition of unit: The Division of Legal Services (DLS), Welfare Invesitgation Unit investigates child care fraud referrals. The DLS Collections Unit works with program staff to collect over payments. This is an area that continues to evolve	☐	☑	☐

Other. Describe:	☐	☐	☐
None	☐	☐	☐

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

Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
The lead agency meets bi-monthly with the Department of Health and Senior Services, Section for Child Care Regulation and the Child and Adult Care Food Program. Participating agencies exchange information on provider issues that impact program integrity.

Recover through repayment plans
Clients and child care providers may enter into a repayment agreement to repay any over payments.

Reduce payments in the subsequent months
Child care provider payments may be recouped from each payment at 10% for non-fraud related over payments and at 20% for fraud related over payments.

Establish a unit to investigate and collect improper payments
The Division of Legal Services (DLS), Welfare Investigation Unit investigates child care fraud referrals. The DLS Collections Unit works with program staff to collect over payments. DLS is expanding the number of staff dedicated to investigating child care referrals.

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

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☐ None
☑ Disqualify client.
 If checked, please describe, including a description of the appeal process for clients who are disqualified

After an appeal notice (adverse action) has been issued, the individual shall be provided a fair hearing upon request. Individuals have 90 days to request a hearing.

☑ Disqualify provider.
If checked, please describe, including a description of the appeal process for providers who are disqualified

Child Care providers are provided written notice when disqualified from participation in the Child Care Assistance Program. This is an area that Missouri continues to review and expand.

☑ Prosecute criminally

☐ Other.
Describe.

The Division of Legal Services, Welfare Investigation Unit (WIU), coordinates and facilitates fraud cases for referral to the local Prosecuting Attorney (PA). If the case is accepted, WIU will work with the PA to prosecute the case.

1.3.6 Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below. Territories not required to complete the Error Rate Review should mark

☐ N/A here

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Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
The case review system will be validated to determine if the original purpose of the review system is met.	Incorrect eligibility determinations and improper authorizations.	The Children's Division will be completing a review of at least 50% of the cases reviewed by supervisors during SFY-13 to validate the review system. Upon completion of the review, additional action steps will be defined to improve the review system and the eligibility and authorization processes.	This action will be completed by 12/31/2014.
Specialized trainings will be developed as identified through the validation of the case review system.	Currently, improper authorizations but it is predicted that additional causes for error will be identified through the validation process	Plan will be to partner with Family Support Division through the validation process to develop specialized training.	On-going through 12/31/2014.
Review child care manual for policy changes to support program improvement and practice.	Improper eligibility and authorization.	The Children's Division will continue to review and revise the Child Care Manual to support program improvement and practice.	Ongoing.
Partner with Division of Legal Services to promulgate state rules and regulations to stregthen the program in areas of accountability.	Improper eligibility and authorization and improper payments.	Identify regulations that need to be strengthened or added to clarify to the public the administration of the child care program.	Initiated in SFY-13 for completion by end of SFY-14.

	Develop and implement a new streamlined electronic eligibility system to better support program administration.	Improper eligibility and authorization.	Contract for new system awarded by Department of Social Services last quarter of SFY-2013.
Estimated completion for child care program 12/31/2015.	Child Care Review Team will monitor child care providers based on a risk assessment to ensure proper health and safety requirements are met and for accuracy in billing and payment.	Improper payment.	The Child Care Review Team was implemented in August 2013 and began reviewing providers in September 2013.
Implementation complete. Reviews on-going.			

1.4 Consultation in the Development of the CCDF Plan

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

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

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

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
☑ **Representatives of general purpose local government (required)** This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.	State Advisory Council (SAC)/ Coordinating Board for Early Childhood (CBEC) consists of state and local government representatives. The Missouri CCDF State plan was presented to the SAC/CBEC. SAC/CBEC provided public comment as well as information to the Lead Agency to inform the development of the state plan.
For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.	

☑ State/Territory agency responsible for public education This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	The state plan was written with input from the Department of Elementary and Secondary Education, Early Childhood. They oversee our state funding Pre-K programs, the Missouri Preschool Project. The Memorandum of Understanding (MOU) between DSS and DESE addresses the exchange of information for programs receiving funding by either department. This MOU also addresses how funding from DSS for school-age programs will be utilized. DSS also has a communication policy in relation to working with outside entities and what information must be exchanged.
☑ State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs	Department and Secondary Education First Steps: The state child care administrator is a standing member of the Missouri's State Interagency Coordinating Council, which is the advisory board for First Steps. First Steps is the Part C agency for the state.
☑ State/Territory agency responsible for licensing (if separate from the Lead Agency)	Through a Memorandum of Understanding with the Department of Health and Senior Services, the lead agency maintains a close working relationship with the state's licensing agency.
☑ State/Territory agency with the Head Start Collaboration grant	SAC/CBEC consists of state and local government representatives, including the state Head Start Collaboration Director. The Missouri CCDF State plan was presented to the SAC/CBEC. SAC/CBEC provided public comment as well as information to the Lead Agency to inform the development of the state plan. The lead agency will be serving as the lead agency for the Missouri Head Start State Collaboration Office.
☑ Statewide Advisory Council authorized by the Head Start Act	SAC/CBEC consists of state and local government representatives, including the state Head Start Collaboration Director. The Missouri CCDF State plan was presented to the SAC/CBEC. SAC/CBEC provided public comment as well as information to the Lead Agency to inform the development of the state plan.
☑ Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services	Through our Memorandum of Understanding with, the Department of Elementary and Secondary Education, the lead agency is a member of the Missouri Afterschool Network.

☑ State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	Through a Memorandum of Understanding with the Department of Health and Senior Services, the lead agency maintains a close working relationship with the state's CACFP program.
☑ State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	The state child care administrator is a member of the steering committee for the Department of Health and Senior Services, Home Visitation project funded through the federal Affordable Care Act.
☑ State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health)	SAC/CBEC consists of state and local government representatives, including the Department of Mental Health and the Department of Health and Senior Services. The Missouri CCDF State plan was presented to the SAC/CBEC. SAC/CBEC provided public comment as well as information to the Lead Agency to inform the development of the state plan.
☑ State/Territory agency responsible for child welfare	The CCDF program is housed within the Children's Division, which is Missouri's child welfare agency.
☐ State/Territory liaison for military child care programs or other military child care representatives	
☐ State/Territory agency responsible for employment services/workforce development	
☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	The Child Care Assistance program consults with the Temporary Assistance for Needy Families program on child care program policy to ensure access to child care services.
☐	Indian Tribes/Tribal Organizations ☐ N/A: No such entities exist within the boundaries of the State	No such entities exist within the bourndaries of the state.
☑ Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	Through our Memorandum of Understanding with the Department of Elementary and Secondary Education, the lead agency is a member of the Missouri Afterschool Network.
☐ Provider groups, associations or labor organizations	

☐ Parent groups or organizations	
☑ Local community organization, and institutions (child care resource and referral, Red Cross)	SAC/CBEC consists of state and local government representatives, including Child Care Aware® of Missouri. The Missouri CCDF State plan was presented to the SAC/CBEC. SAC/CBEC provided public comment as well as information to the Lead Agency to inform the development of the state plan.
☐ Other	

1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §§98.14(C)). At a minimum, the description should include:

a) Date(s) of notice of public hearing: 04/23/2013
 Reminder - Must be at least 20 days prior to the date of the public hearing.

b) How was the public notified about the public hearing? The Children's Division shared information with the state resource and referral agencies, community partnerships, United Way and other local stakeholders. Notice of public hearing was posted on the DSS internet home page on April 23, 2013 and on the message board for those who submit attendance through the Child Care Online Invoicing System. Additionally, the public hearing information was made available to community partnerships and stakeholders.c) Date(s) of public hearing(s): 05/14/2013
 Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).

d) Hearing site(s) Springfield, St. Louis, Kansas City, Columbia, Cape Girardeau, St. Joseph, Rolla and Poplar Bluff
e) How was the content of the Plan made available to the public in advance of the public hearing(s)? DSS internet home page, public notice, and shared with partner agencies. Paper copies are made available upon request.
f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? Public comment is provided at all public hearings. All comments are compiled and reviewed prior to plan submission. 1.4.2 May 14, 16, 21 and 23, 2013.

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing. For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and

provider work schedules.

The lead agency uses both a public and teleconference hearing format to expand its outreach to the public. See 1.4.2 for more detail.

1.5. Coordination Activities to Support the Implementation of CCDF Services

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

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

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

Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe the goals or results you are expecting from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.

☑	Representatives of general purpose local government This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies.	The DSS coordinates with the Department of Health and Senior Services (DHSS) who oversees Health Consultants across the state to provide training and technical assistance to all child care programs around health issues. The DSS sits on the Child Care Health Consultation Advisory Council. Missouri has 20 Community Partnerships across the state, DSS coordinates to ensure services that meet the specific needs of their community can be made available. DSS, Early Childhood and Prevention Services Section works with several of the partnerships to implement Home Visitation and Out of School Time services in their communities. Many of the Community Action Agencies in Missouri are also Head Start/Early Head Start grantees either with state funding or federal funding. The DSS coordinates with these agencies to provide trainings in communities and to provide Early Head Start services within community partner sites.	The goals of this coordination is to increase greater accessibility and availability to higher quality care for children and greater accessibility and availability of higher quality training and technical assistance to child care programs.
☑	State/Territory agency responsible for public education **(required)** This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.	DSS coordinates with DESE on early childhood grants to school districts along with school-age grants, through an MOU. This MOU provides support to the Missouri Afterschool Network. This MOU also provides grants to vocational schools for Child Development Associate Systems, a member of the DSS early childhood quality staff sits in on evaluation of these annually.	The goals of this coordination is to increase the availability and accessibility of high quality child care, in addition to high quality education for professionals.

☑	Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services **(required)**	Child Care Aware® of Missouri is our resource and referral agency and DSS coordinates with them by being a part of a partner group working on data exchanges and to ensure training is available statewide and is of high quality. The DSS Educare program sits within Universities or Community Partnerships and we coordinate with them to provide technical assistance and training to our registered family home child care providers.	The goal of this coordination is to increase accessibility and availability of higher quality training and technical assistance to child care programs across the state.
☑	State/Territory agency responsible for public health **(required)** This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health	DSS provides funding to support the delivery of Health Consultation services through a Memorandum of Understanding (MOU) with the Department of Health and Senior Services (DHSS); DSS serves on the state steering committee for ECCS to strategize how to coordinate early childhood services throughout all state child serving agencies. The ECCS plan is merged with the state strategic plan for the State Early Childhood Advisory Council.	The goal is to assist in improving the outcomes for children through an early childhood system.
☐	State/Territory agency responsible for employment services / workforce development **(required)**	The Child Care Program has worked cooperatively with the Temporary Assistance Program and the Missouri Works Assistance program to enhance care policy for field support staff in order to support the TA program in meeting its work participation rate of 50%.	The goal is to assist TA families in having access to child care, while supporting the TA program in meeting its work participation rate of 50%.

☑	State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies**(required)**	The Child Care Program has worked cooperatively with the Temporary Assistance Program and the Missouri Works Assistance program to enhance care policy for field support staff in order to support the TA program in meeting its work participation rate of 50%.	The goal is to assist TA families in having access to child care, while supporting the TA program in meeting its work participation rate of 50%.
☐	Indian Tribes/Tribal Organizations (required) ☑ N/A: No such entities exist within the boundaries of the State		

For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery

☑	State/Territory agency with the Head Start Collaboration grant	The Coordinating Board for Early Childhood (CBEC) was established in state statute to provide guidance and coordination of early childhood services throughout the state. DSS is a permanent standing representative on the CBEC. CBEC is designated as the State Early Childhood Advisory Council. DSS is a member of the state advisory council for the Head Start State Collaboration Office. DSS has assumed the role as the lead agency for the Head Start Collaboration grant.	The goal is to serve as the public/private entity for coordinating a cohesive system of early childhood programs and services that will result in the healthy development of, and high quality education for, all Missouri children from birth through age five (5).

☐	State/Territory agency responsible for Race to the Top - Early Learning Challenge (RTT-ELC) ☑ N/A: State/Territory does not participate in RTT-ELC		
☑	State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)	The DSS coordinates with the Child and Adult Care Food Program (CACFP) to continue discussion and efforts to support provider participation in both programs and compliance. DSS works closely with the Child and Adult Care Food Program to identify and investigate potentially fraudulent situations. Also, DSS shares CACFP information with its provider population.	The goal is to share information and investigate situations jointly to ensure program integrity and accountability.

☐	State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs		
☑	State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant	The Children's Division, Early Childhood and Prevention Services Section is a member of the Maternal, Infant, and Early Childhood Home Visiting ProgramSteering Committee.	The goal is to share information in the effort to coordinate Home Visitation efforts throughout the state. The Children's Division has moved towards requiring its Home Visitation contractors to use an evidence-based home visiting models identified by the U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration, Maternal and Child Health or a promising approach.

☑	State/Territory agency responsible for child welfare	The Children's Division, Early Childhood and Prevention Services Section continues its efforts to embed the philosophies of high quality early care and education into the practices of child well being and the prevention of child abuse/neglect. In March 2013, the Children's Division entered into Memorandum of Agreement (MOA) with the Missouri Head Start Association and the Missouri Head Start State Collaboration Office. The purpose of this MOA was to provide a statewide framework for local Children's Division and Head Start agencies to develop local collaboration plans and referral processes to better support children and families receiving services through the child welfare system. The Children's Division enhanced the Family-Centered practice model for child welfare children by incorporating the Strengthening Families approach which assesses protective factors for families in their homes and communities. This begins by shifting the focus from family risks and deficits to family strengths and resiliency and embeds effective prevention strategies into existing systems. The Early Childhood and Prevention Services Section coordinates program activities with child welfare through a strengthening families approachwhich addresses: appropriate child care for protectiveservices children, back ground screening requirements for child care providers as well as foster care providers, payment processes for child careproviders of protective services children, and most critically, child abuse/neglect prevention services. Family Assistance and Management Information System (FAMIS)/Family and Children Electronic System (FACES) Interface: This system interface provides child welfare workers with enhanced features in determining eligibility and authorizing child care for children receiving services through the child welfare system. This interface streamlines the child care system by allowing eligibility, authorizations, and child care providersto be paid through one system, thus improving the accountability of the child care program.	The goals of this coordination is to increase greater accessibility and availability to higher quality care for child welfare children and provide concrete supports to strengthen families.

☐	State/Territory liaison for military child care programs or other military child care representatives		
☐	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21		
☑	Local community organizations (child care resource and referral, Red Cross)	The DSS coordinates with the Resource and Referral agency to provide referrals to families along with training and technical assistance to child care programs. This is done by contracting with them for these services and with regular communication. The DSS Educare programs mentioned above are also done with local community organizations and we coordinate through contracts and with regular ongoing communication. Improvements and changes are made at least annually to this program with input from the providers at the community level.	The goals of this coordination are the same as listed above for these organizations but would also include better access of high quality care for families searching for child care.
☐	Provider groups, associations or labor organizations		
☐	Parent groups or organizations		
☐	Other		

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

☑ Yes. If yes,

        a)

        Provide the name of the entity responsible for the coordination plan(s):

        Coordinating Board for Early Childhood.

        b)

        Describe the age groups addressed by the plan(s):

        Pre-birth to 8, with some youth development.

        c)

        Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):

        ☑ Yes

        ☐ No

        d)

        Provide a web address for the plan(s), if available:

        http://dss.mo.gov/cbec/

☐ No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs? (658D(b)(1)(D), §98.14(a)(1)) Check which entity(ies), if any, the State/Territory has chosen to designate.

☑ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

Under Missouri statute, the Children's Services Commission is established to serve as a statewide advisory body on all children's issues. The Coordinating Board for Early Childhood (CBEC) was established as a subsidiary of the Children's Services Commission in 2004, members were appointed in 2006. The CBEC has a responsibility to coordinate services for families and children up to age 5.

☑ State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

The CBEC is designated as Missouri's State Early Childhood Advisory Council. As a result of this designation, CBEC has expanded its focus through age 8. However, certain activities within CBEC extend to include youth development.

☐ Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

☐ Other

Describe

☐ None

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

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

The Department of Social Services continues to be involved in projects that develop and strengthen public-private partnerships around early childhood issues, including meeting child care needs, improving early learning experiences, and strengthening family relationships.

- The Early Childhood Coordinating Board focuses on the advancement of an early childhood system in the state. One of the expected results of this board is to increase awareness and leverage public and private support for early childhood efforts. The Board has a statutory charge to create a statewide system of care for children.

- The state continues to partner with TEACH to bring educational opportunities to child care professionals. TEACH is offered in limited areas in the state with at least one location operating the program as a public-private partnership through matched funding by local private businesses.

- There are twenty Caring Community Partnerships throughout the state whose purpose is to improve outcomes for children and families. These entities create collaborations locally and partner with the state to maximize resources and achieve specified results. The partnerships are publicly funded through the Department of Social Services and have a strong focus on early childhood activities. One expected result is to have community ownership and involvement in early childhood issues.

- The Child Care Aware® of Missouri promotes business involvement by providing technical assistance to the business community on developing and/or supporting child care programs for employees. The intent is to encourage business involvement to assist in increasing the capacity for child care that supports working families.

☐ No

1.6. Child Care Emergency Preparedness and Response Plan

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

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

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

☑ **Developed.**   A plan has been developed as of **[insert date]:** 02/01/2013 and put into operation as of **[insert date]:** 09/30/2013, if available. Provide a web address for this plan, if available: www.dss.mo.gov

☐ **Other. Describe:**

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

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- ☑ Planning for continuation of services to CCDF families

- ☑ Coordination with other State/Territory agencies and key partners

- ☑ Emergency preparedness regulatory requirements for child care providers

- ☑ Provision of temporary child care services after a disaster

- ☐ Restoring or rebuilding child care facilities and infrastructure after a disaster

- ☐ None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

2.1 Administration of the Program

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

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

- ☑ Eligibility rules and policies (e.g., income limits) are set by the:
  - ☑ State/Territory
  - ☐ Local entity.
  If checked, identify the type of policies the local entity(ies) can set

  - ☐ Other.
  Describe:

- ☑ Sliding fee scale is set by the:
  - ☑ State/Territory
  - ☐ Local entity.

If checked, identify the type of policies the local entity(ies) can set

```
[                                                                    ]
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☐ Other.
Describe:

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[                                                                    ]
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☑ Payment rates are set by the:
  ☑ State/Territory
  ☐ Local entity.
If checked, identify the type of policies the local entity(ies) can set

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[                                                                    ]
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☐ Other.
Describe:

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

<div align="right">Effective Date: 01-OCT-13</div>

Implementation of CCDF Services/Activities
Agency (Check all that apply)
Who assists parents in locating child care (consumer education)?

Who issues payments?

Who determines eligibility?

Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe:

Agency (Check all that apply)
☑ CCDF Lead Agency

☑ TANF agency

☐ Other State/Territory agency.

Describe:

☐ Local government agencies such as county welfare or social services departments

☐ Child care resource and referral agencies

☐ Community-based organizations

☐ Other.

Describe:

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

Agency (Check all that apply)

☐ CCDF Lead Agency

☐ TANF agency

☐ Other State/Territory agency.

Describe:

☐ Local government agencies such as county welfare or social services departments

☑ Child care resource and referral agencies

☐ Community-based organizations

☐ Other.

Describe:

Who issues payments?

Agency (Check all that apply)

☑ CCDF Lead Agency

☐ TANF agency

☐ Other State/Territory agency.

Describe:

☐ Local government agencies such as county welfare or social services departments

☐ Child care resource and referral agencies

☐ Community-based organizations

☐ Other.

Describe:

Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)

Direct payment to the child care provider is the preferred method of payment. Payment can be issued by paper check or direct deposit. Also, reimbursement to the parent is available and these payments can be issued by paper checks or direct deposit. Missouri does not issue cash payment.

Other. List and describe:

Quality. The CCDF Lead Agency administers quality.

2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

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

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- ☑ CCDF Lead Agency
- ☑ TANF offices
- ☑ Other government offices
- ☑ Child care resource and referral agencies
- ☑ Contractors
- ☐ Community-based organizations
- ☐ Public schools
- ☑ Internet

(provide website): http://www.dss.mo.gov/cd/childcare/

- ☑ Promotional materials
- ☐ Community outreach meetings, workshops or other in-person meetings
- ☐ Radio and/or television
- ☑ Print media
- ☐ Other.

Describe:

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

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- ☑ In person interview or orientation
- ☑ By mail
- ☑ By Phone/Fax
- ☐ Through the Internet

(provide website):

- ☐ By Email
- ☐ Through a State/Territory Agency
- ☐ Through an organization contracted by the State/Territory
- ☐ Other.

Describe:

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

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

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

The DSS contracts with the resource and referral agency, Child Care Aware® of Missouri to provide via phone or on-line search, information and consumer education to individuals of all income levels as they select the best child care options for their child, their work locations/schedules, and their family's needs. (This includes referral to the DSS Family Support Division for child care subsidy and MoHealthNet for Kids). They ensure that low income families are well-informed about and assisted in finding high quality child care arrangements appropriate for the child. They make printed materials for all families available at approximately 6th to 8th grade reading levels.

Child Care Aware® of Missouri provides a consumer education information packet to all families who call or come into an affiliated office for child care information. The packet includes:

- Information on indicators of quality child care;
- Range of child care cost;
- Child care options available (types of facilities, licensed, license exempt, unlicensed, registered, accredited, etc.);
- Information regarding other family or child care-related issues;
- Information on child care assistance programs;
- Information regarding inclusion of children with special needs;
- Information regarding MoHealthNet health insurance programs; and
- Information regarding the DSS child care subsidy program.

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high

quality programs in rural, suburban, urban, and low-income communities.

Child care providers who are accredited by a DSS recognized accrediting body receive a 20% rate differential.

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

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☑ Provide access to program office/workers such as by:
☐ Providing extended office hours
☑ Accepting applications at multiple office locations
☑ Providing a toll-free number for clients
☑ Email/online communication
☐ Other.
Describe:

☑ Using a simplified eligibility determination process such as:
☐ Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
☑ Developing a single application for multiple programs
☑ Developing web-based and/or phone-based application procedures
☑ Coordinating eligibility policies across programs.
List the program names: TANF, Food Stamps and Medicaid

☑ Streamlining verification procedures, such as linking to other program data systems
☑ Providing information multi-lingually
☑ Including temporary periods of unemployment in eligibility criteria for new applicants (job search, seasonal unemployment).
Length of time: 30 days

 (Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).

☐ Other.
Describe:

☐ Other.

Describe:

☐ None

2.2.6. Describe the Lead Agencies policies to promote continuity of care for children and stability for families. Check the strategies, if any, that your State/Territory has chosen to implement.

<div align="right">Effective Date: 01-OCT-13</div>

☑ Provide CCDF assistance during periods of job search.

Length of time: 30 days

☐ Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)

☐ Synchronize review date across programs

List programs:

☑ Longer eligibility re-determination periods (e.g., 1 year).

Describe:

One (1) year.

☐ Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs.

Describe:

☐ Extend periods of eligibility for school-age children under age 13 to cover the school year.

Describe:

☐ Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment

☐ Individualized case management to help families find and keep stable child care arrangements.

Describe:

☐ Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year

☐ Other.
Describe:

[blank box]

☐ None

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

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☑ Application in other languages (application document, brochures, provider notices)
☑ Informational materials in non-English languages
☐ Training and technical assistance in non-English languages
☐ Website in non-English languages
☐ Lead Agency accepts applications at local community-based locations
☑ Bilingual caseworkers or translators available
☐ Outreach Worker
☐ Other.
Describe:

[blank box]

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered :

The Child Care Assistance Application is available in Spanish and English. Staff working with non-English speaking families may use a translator or other bilingual staff to translate for the family. The Family Support Division does have a contract with Language Select for translation services. Language Select provides interpretations in 200 languages.

2.2.8. How will the Lead Agency overcome language barriers with providers? Check the strategies, if any, that your State/Territory has chosen to implement.

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☐ Informational materials in non-English languages
☐ Training and technical assistance in non-English languages
☐ CCDF health and safety requirements in non-English languages
☐ Provider contracts or agreements in non-English languages

- ☐ Website in non-English languages
- ☑ Bilingual caseworkers or translators available
- ☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- ☐ Other.

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered:

Staff working with non-English speaking providers may use a translator to translate for the provider. The Children's Division does have a contract with Language Select for translation services. Language Select provides interpretations in 200 languages.

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

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Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available: http://dss.mo.gov/cd/childcare/pdf/ccapplication.pdf

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
☑ Applicant identity	Valid driver's license and social security card. This information is documented in the Family Assistance Management Information System (FAMIS).
☑ Household composition	Household composition is self declared by the applying household member.
☑ Applicant's relationship to the child	View acceptable verifications such as birth certificates, Birth Name Inquiry (IBTH) screen, court orders, or other relationship documentation, such as hospital records, family Bible documentation, or as a last resort, third party verification. Accept the household's statement of relationship when other sources of verification are not available. IBTH is an automated verification of relationship for children accessible to staff for children born in Missouri. This information is documented in the Family Assistance Management Information System (FAMIS).

☑ Child's information for determining eligibility (e.g., identity, age, etc.)	View acceptable verifications such as birth certificates, Birth Name Inquiry (IBTH) screen, court orders, or other documentation, such as hospital records, family Bible documentation, or as a last resort, third party verification. IBTH is an automated verification of relationship for children accessible to staff for children born in Missouri. This information is documented in the Family Assistance Management Information System (FAMIS).
☑ Work, Job Training or Educational Program	Letter from employer, phone contact, wage stubs, Employment History (IMES) screen, and through the Work Number. The Work Number is a service of TALX Corporation that provides an automated process to handle employment verifications. This information is documented in the Family Assistance Management Information System (FAMIS).
☑ Income	Wage stubs, IMES, and through the Work Number. The Work Number is a service of TALX Corporation that provides an automated process to handle employment verifications. This information is documented in the Family Assistance Management Information System (FAMIS).
☐ Other. Describe:	

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

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☑ Time limit for making eligibility determinations.

Describe length of time 15 days

☑ Track and monitor the eligibility determination process
☐ Other.
Describe

☐ None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1 through 2.2.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

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☐Yes.

☑ No. _____

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

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act. In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

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

State/Territory TANF Agency The Department of Social Services Family Support Division and the lead agency.

b) Provide the following definitions established by the TANF agency.
- "appropriate child care": Appropriate child care in formal and informal settings includes: Child care that is consistently available; Child care that is available during the participant's hours of employment, education, training, and/or work activity; Child care that addresses the specialized needs of the child. For example, a child with a disability; Child care that is developmentally and age appropriate. This determination will be based on the information provided by the parent when demonstrating that the care available to them does not meet the developmental and/or age appropriate skills of their child; Child care by a full time, year round, primary provider who is at least eighteen (18) years of age. Child care by a provider who has undergone a Child Abuse and Neglect background screening and a Tuberculosis test. Child care is provided in a residence which has running water, electricity, a safe source of heat, meets any local housing code standards, and a working telephone is accessible to the provider either in the provider¿s residence or within reasonable proximity of the residence.
- "reasonable distance": A determination of whether child care is within reasonable distance should include, but not be limited to, the following factors:1) When the participant has no independent transportation, they can be expected to use public transportation if: It is available at the appropriate time for the participant's schedule of work or work participation actvitiy; It is not cost prohibited for the participant; and, the time inovled in getting to public transporation, child care and then to work is reasonable in relation to the participant's actuall hours of work or work participation activity. 2) if the participant has an indpendent means of transportation, the transportation myust include the following: The vehichle or other transporation is reliable; the recipient is able to afford the transporation costs, including the costs involved in maintaing and ensuring the reliability of the transporation. The commuting time from the individual's home to thier child care provider and thier work site (or work participation activity) is no more than an hour each way.
- "unsuitability of informal child care": Families are not required to accept care with providers who

are not licensed or registered. There are certain circumstances that may exist that will deem a child care provider as

- "affordable child care arrangements": Available child care is affordable when the cost of care does not exceed ten percent (10%) of a family's gross income less medical insurance premiums. This ten percent (10%) includes any sliding fee a family is required to pay. This ten percent (10%) does not include federal, state, or local child care subsidy.

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

☑ In writing
☑ Verbally
☐ Other.
Describe:

2.3. Eligibility Criteria for Child Care

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

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

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residing with -

Living in the same physical residence or, in the case of a parent who is temporarily out of the home due to illness or injury, maintaining care and custody.

in loco parentis -

A specified relative or legal guardian maintaining care and control of the child.

2.3.2. Eligibility Criteria Based Upon Age

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

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

☑ Yes,and the upper age is up to age 19 (may not equal or exceed age 19).
Provide the Lead Agency definition of *physical or mental incapacity -*

Physical or mental incapacity as certified by a physician or psychologist or by receipt of SSI or Social Security Disability.

☐ No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

☑ Yes,and the upper age is up to age 19 (may not equal or exceed age 19).
☐ No.

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

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

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

Employment at a job or trade for which wages are received in compensation for services rendered.

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

☑ Yes.

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

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

attending job training or educational program -

Attending(a job training or educational program; include minimum hours if applicable) -Attending as necessary to maintain satisfactory progress, as defined by the institution or job training program.
Job training and educational program- A program whose ultimate goal is that the participant will be employable and will have the skills necessary to become self-sufficient.
The lead agency allows for 30 days of job search due to loss of employment.

☐No.

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

Effective Date: 01-OCT-13

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

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

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

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

 protective services

Services available to prevent or remedy child abuse and neglect. This includes children in the custody of the Children's Division placed in Foster Care or guardianship placements, or receiving services through the Family Centered Services, Intensive In-home Services, and Adoption Subsidy programs.

☐No.
b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective

services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☑ Yes.
☐ No.

2.3.5. Income Eligibility Criteria

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

income -

Income is defined as all sources of payment received by adult or emancipated eligibility unit members including, but not limited to: wages, adjusted gross income from self-employment, adjusted gross income from farm income, social security, dividends, and interest.

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

☑ Adoption subsidies
☑ Foster care payments
☐ Alimony received or paid
☐ Child support received
☐ Child support paid
☐ Federal nutrition programs
☐ Federal tax credits
☐ State/Territory tax credits
☐ Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
☑ Medical expenses or health insurance related expenses
☐ Military housing or other allotment/bonuses
☐ Scholarships, education loans, grants, income from work study
☐ Social Security Income
☐ Supplemental Security Income (SSI)
☐ Veteran's benefits
☐ Unemployment Insurance
☐ Temporary Assistance for Needy Families (TANF)
☐ Worker Compensation
☐ Other types of income

not listed above:

N/A.

☐ None

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

☑ Children under age 18
☑ Children age 18 and over - still attending school
☑ Teen parents
☑ Unrelated members of household
☐ All members of household except for parents/legal guardians
☐ Other.
Describe:

N/A.

☐ None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

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

Family Size	(a) 100% of State Median Income (SMI)($/month)	(b) 85% of State Median Income (SMI)($/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) $/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	3609	3067.65	1212	34
2	4306	3660	1590	37
3	5002	4252	2002	40
4	5908	5022	2414	41
5	6853	5825	2827	41

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

☑Yes.
If yes, provide the requested information from the table in 2.3.5d and **describe below:**

Note: This information can be included in the table below.

Missouri has a Transitional Child Care (TCC) program. Active child care households whose increase in income causes them to exceed the current 123% maximum child care income eligibility limit, may continue to receive child care benefits at 75% of the full subsidy amount until their income reaches 150% of the Federal Poverty Level (FPL). When income exceeds 151% of the Federal Poverty Level active child care families may continue to receive child care benefits at 50% of the full subsidy amount until income reaches 175% of the FPL.

☐No.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month)[Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) $/month	(d) % of SMI[Divide (c) by (a), multiply by 100]
1	3609	3068	1677	46
2	4306	3660	2263	53
3	5002	4252	2849	57
4	5908	5022	3435	58
5	6853	5825	4022	59

f) SMI Year 2013 and SMI Source LIHEAP

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

2.3.6. Eligibility Re-determination

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Does the State/Territory follow OCC's 12 month re-determination recommendation? (See Program Instruction on Continuity of Care
http://www.acf.hhs.gov/programs/occ/resource/im2011-06

☑Yes

☐No. If no, what is the re-determination period in place for most families?

☐6 months
☐24 months
☐Other.
Describe:

☐Length of eligibility varies by county or other jurisdiction.
Describe:

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

☐Yes. If yes, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

☐ Head Start and/or Early Head Start Programs.
Re-determination period:

☐ Pre-kindergarten programs.
Re-determination period:

☐ TANF.
Re-determination period:

☐ SNAP.
Re-determination period:

☐ Medicaid.
Re-determination period:

SCHIP.
☐ SCHIP.
Re-determination period:

☐ Other.
Describe:

☑No.

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

Families are required to report changes in household composition, income, child care need, age of child, and changes in provider.

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

 When families report a change (i.e. change in income, household size,need) prior to their re-determination period, their eligibility would be reviewed to determine if family still qualifies for services.

e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples http://www.acf.hhs.gov/programs/occ/resource/im2011-06).

The agency does have a 12 month eligibility period, along with a tiered eligibility system. The agency implemented continuity of care policy in efforts to support families. Families are made aware of the Child Care Assistance program through the brochures, child care resource and referral, providers and through other agency partners. The lead agency works with TANF, SNAP, Medicaid and CHIP programs to streamline documentation for families.

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

☑ Yes.
If yes, describe:

Families receive notification through mail 45 days prior to the expiration of their child care benefits. Families then resubmit the necessary documentation to redetermine eligibility.

☐ No.

2.3.7. Waiting Lists

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

☑Lead Agency currently does not have a waiting list and:

☑ All eligible families *who apply* will be served under State/Territory eligibility rules

☐ Not all eligible families *who apply* will be served under State/Territory eligibility rules

☐ Lead Agency has an active waiting list for:

☐ Any eligible family who applies when they cannot be served at the time of application

☐ Only certain eligible families.

Describe those families:

☐ Waiting lists are a county/local decision.
Describe:

☐ Other.
Describe:

2.3.8. Appeal Process for Eligibility Determinations

Effective Date: 01-OCT-13

Describe the process for families to appeal eligibility determinations:

Families upon receiving an appeal (action) notice have 90 days to request a hearing. This information is provided on the appeal (action) notice, along with information for their local legal services office and a hearing request form. Families are to submit this information to their Local Family Support Division.

2.4. Sliding Fee Scale and Family Contribution

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

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1. Will the attached sliding fee scale be used in all parts of the State/Territory?

☑Yes.

Effective Date: July 2013

☐No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b,** etc.

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

☐State Median Income,

Year:

☑Federal Poverty Level,

Year: 2013

☐Income source and year varies by geographic region.

Describe income source and year:

☐Other.

Describe income source and year:

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

☑ Fee as dollar amount and

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

☐ Fee as percent of income and

☐Fee is per child with the same percentage applied for each child

☐ Fee is per child and discounted percentage applied for two or more children
☐ No additional percentage applied charged after certain number of children
☐ Fee per family
☐ Contribution schedule varies by geographic area.
Describe:

☐ Other.
Describe:

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

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

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☐ Yes,
and describe those additional factors:

☑ No.

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

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

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☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
☐ NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee.
The poverty level used by the Lead Agency for a family of 3 is: 19,530

☑SOME families with income <u>at or below the poverty level</u> for a family of the same size ARE NOT required to pay a fee.
The Lead Agency waives the fee for the following families:

Protective services children and special needs children do not pay sliding fees.

2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44) Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes.* Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs.*

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How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules

| Children with special needs

Provide the Lead Agency definition of *Children with Special Needs:*

A child with a special need is defined as one who is under age 18 or under age 19 but still in high school and who:

Receives Foster Care payments through DSS; Receives Adoption Subsidy payments through DSS; Is under court ordered supervision; Has a physical or mental incapacity; Is eligible for and receiving services under DMH; Receives SSI; or Is active in Children's Service Protective Service system. In addition, a child with one or more of the following criteria may also be deemed as 'special needs':

Specific disability information and characteristics, Diagnosed as having developmental disability, health or medical condition due to disability, Behavioral or emotional issues, learning disability, or developmental delays | ☑ Priority over other CCDF-eligible families
☐ Same priority as other CCDF-eligible families
☐ Guaranteed subsidy eligibility
☐ Other.

Describe: | ☑ Yes.

The time limit is:

The period of eligibility is twelve months following approval for services.

☐ No | ☐ Different eligibility thresholds.

Describe:

☐ Higher rates for providers caring for children with special needs requiring additional care
☐ Prioritizes quality funds for providers serving these children
☑ Other.

Describe:

Children with special needs continue to rank high among our priorities. Payment is allowed for special needs children at their functional age instead of their chronological age.

Providers who care for a special needs child may receive a 25% rate differential to their base rate. Example: A provider caring for a seven year old who functions at age one is paid at the higher infant rate and that rate would be enhanced by 25% above the base infant rate. |

Children in families with very low incomes **Provide the Lead Agency definition of** *Children in Families with Very Low Incomes:* Very low income is defined as households whose income does not exceed 15% of the State Medium Income. Very low-income households pay $1.00 per year sliding fee.	☑ Priority over other CCDF-eligible families ☐ Same priority as other CCDF-eligible families ☐ Guaranteed subsidy eligibility ☐ Other. Describe:	☑ Yes. The time limit is: The period of eligibility is twelve months following approval for services. ☐ No	☑ Different eligibility thresholds. Describe: TANF families are required to cooperate with Child Support Enforcement and engage in work search activities. ☐ Waiving co-payments for families with incomes at or below the Federal Poverty Level ☑ Other. Describe: Families with very low income are required to pay a sliding fee of $1.00 per year as their portion of the child care cost. Families with income slightly higher will pay a sliding fee based on their income and household size.

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF? (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4)) **Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

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

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) **Reminder** - Lead Agencies are reminded that any eligibility criteria and terms provided

below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

Term(s) - Definition(s)

Describe:

Teen Parent - Jr. High/High School teens who are parents and who are attending school.

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

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a))

2.6.1. Child Care Certificates

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

☐ Before parent has selected a provider
☑ After parent has selected a provider
☐ Other.
Describe:

_____

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

☐ Certificate form provides information about choice of providers
☐ Certificate is not linked to a specific provider so parents can choose provider of choice
☑ Consumer education materials (flyers, forms, brochures)
☑ Referral to child care resource and referral agencies
☑ Verbal communication at the time of application
☐ Public Services Announcement
☐ Agency

Website:

☐ Community outreach meetings, workshops, other in person activities
☐ Multiple points of communication throughout the eligibility and renew process
☐ Other.
Describe:

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

☑ Authorized provider(s)
☑ Authorized payment rate(s)
☑ Authorized hours
☑ Co-payment amount
☑ Authorization period
☐ Other.
Describe:

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

All child care services are only available through certificate minus the parent's share of their child care cost.

2.6.2. Child Care Services Available through Grants or Contracts

Effective Date: 01-OCT-13

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note:** Do not check "yes" if every provider is simply required to sign an agreement in order to be paid in the certificate program.

☐ Yes.
If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts:

☑ No. If no, skip to 2.6.3

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

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

☐ Support programs in providing higher quality services
☐ Support programs in providing comprehensive services
☐ Serve underserved families.
Specify:

☐ Other.
Describe:

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

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

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

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

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

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☐ Signed declaration
☐ Parent Application
☐ Parent Orientation
☑ Provider Agreement
☐ Provider Orientation
☐ Other.
Describe:

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

Effective Date: 01-OCT-13

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

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available

to the public on request. (658E(c)(2)(C), §98.32)

The Department of Social Services allows for parental complaints to be recorded in the "comments section" of the registered child care provider system. This information is available to applicants upon request.

 The Department of Health and Senior Services, Section for Child Care Regulation has regulatory staff, Child Care Facility Specialists, located in District Health Offices throughout the state. These staff members investigate all reports of alleged rule violations. This complaint investigation is mandated by Missouri Revised Statues, Chapter 210.203, which states, "**Complaints against child care facilities, open records to be kept by department.—The department of health shall maintain a record of *substantiated, signed parental complaints against child care facilities licensed pursuant to this chapter, and shall make such complaints and findings available to the public upon request.*"** Substantiated complaints are maintained in each licensed and license-exempt child care facility record. These files are available for public review by appointment at any of the District Health Offices where Section for Child Care Regulation staff members are located. Information notifying parents and the public that the files are open for review is included on Section for Child Care Regulation brochures and the educational information provided by the Resource and Referral agencies. Detailed information regarding the complaint process is contained on the Department of Health and Senior Services web site at http://health.mo.gov/safety/childcare/index.php.

2.7. Payment Rates for Child Care Services

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

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

☑ Yes.Effective Date: July 1, 2013

☐ No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b, etc.** , etc.

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

☑ Policy on length of time for making payments.

Describe length of time: Payment is to be made within 30 days of receipt.

☑ Track and monitor the payment process

☐ Other.

Describe:

☐ None

2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2009). The MRS must be completed prior to the submission of the CCDF Plan (see Program Instruction CCDF-ACF-PI-2009-02 http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02 for more information on the MRS deadline).

Effective Date: 01-OCT-13

a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): 08/2012

b) Provide a **summary of the results** of the survey.

The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

Market Rate Survey Summary:
The United States Department of Health and Human Services requires state agencies that administer Childcare Block Grant Funds to collect information on childcare market rates. To meet this requirement, the Research and Evaluation Unit of the Missouri Department of Social Services, on behalf of the Children's Division (CD), Early Childhood and Prevention Services Section (ECPS), conducts a survey biannually that contains information about rates, as well as subsidized payment issues and other statistics.

The Missouri Department of Health and Senior Services, which is responsible for licensing childcare facilities, provided a list of all licensed facilities. Surveys were mailed to all 3,552 licensed providers. A total of 1,098 questionnaires were completed either online or by paper, for a return rate of 30.91%.

Providers were asked to report rates as charged hourly, daily, weekly, biweekly, or monthly. These reported rates were then converted to daily rates by multiplying hourly rates by 7.5, dividing weekly rates by five, bi-weekly rates by 10 and monthly rates by 22. Rates derived in this manner were checked for reasonableness in light of the type of care provided and the area of the state in which the care was provided.

Surveys returned with no rate for a given category of care had no influence on calculating rate

information for that type of care. Because of this, the total number of surveys for each type of care and classification varies depending on the number of providers that reported a rate for that type of care.

Caution should be used in interpreting results where there are few responses in a given geographical area or for a certain type of care. This is especially true with respect to Group Homes. Also, keep in mind that voluntary participation introduces the potential for self-selection bias. With respect to this particular survey, providers charging more than DSS rates may have a perceived incentive to return the survey in the hope of influencing state paid rates. Providers charging below or close to the DSS rates may be more satisfied and, therefore, have less incentive to respond. In addition, only licensed providers were surveyed. It is uncertain how the inclusion of unlicensed providers may have affected the results.

In conclusion, Biennial Market Rate Surveys seem to support a significant rate difference between rural vs. metro vs. sub-metro counties. Due to budgetary considerations, Missouri has chosen to request additional state funding to increase income eligibility for families as opposed to increasing rates for providers. Child care provider rates have not been increased since SFY 2009. As a result, Missouri's base rates are reporting as being well below the market statewide.

Licensed and regulated providers are paid at an increased rate for providing care in a state approved environment. In an effort to increase the availability of excellent child care for Missouri families, Missouri does offer rate differentials for some providers caring for a disproportionate share of subsidy children, as well as for those that are accredited by approved accrediting bodies. Rates for licensed and regulated child care providers have been increased effective July 1, 2013.
To view the 2012 Market Rate Survey results go to http://dss.mo.gov/re/pdf/oecmmr/2012-child-care-market-rate-survey.pdf

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

Effective Date: 01-OCT-13

2.7.4a - Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	$1,083.25	$596.22	9th
Full-Time Licensed Center Preschool (59 months)	$736.61	$348.16	14th
Full-Time Licensed Center School-Age (84 months)	$761.31	$348.16	9th

2.7.4b - Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey

Full-Time Licensed Center Infants (11 months)	$519.96	$318.48	8th
Full-Time Licensed Center Preschool (59 months)	$389.97	$227.48	18th
Full-Time Licensed Center School-Age (84 months)	$389.97	$209.07	3rd

2.7.4c - Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	$649.95	$372.64	10th
Full-Time Licensed FCC Preschool (59 months)	$519.96	$295.73	3rd
Full-Time Licensed FCC School-Age (84 months)	$433.30	$272.98	13th

2.7.4d - Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	$368.31	$227.48	3rd
Full-Time Licensed FCC Preschool (59 months)	$346.64	$199.10	1st
Full-Time Licensed FCC School-Age (84 months)	$346.64	$199.00	2nd

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

Effective Date: 01-OCT-13

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

Maximum funding levels for child care subsidy is determined by appropriations. Rates are set using the following criteria: state geographic areas; type of facility (center, group or family home/licensed or registered); duration of care (full, half or part day); and age of the child.

b) Describe how license-exempt family child care home payment rates are set:

Maximum funding levels for child care subsidy is determined by appropriations. Rates are set using the following criteria: state geographic areas; type of facility (center, group or family home/licensed or registered); duration of care (full, half or part day); and age of the child.
Licensed-exempt family child care home (Family Friend and Neighbor care) who are providers caring for four or less unrelated children, are not included in the biennial Market Rate Survey because the rate they agree to receive is the state's rate and does not reflect the market. Because family home providers, caring for four or less unrelated children, are considered legal care in Missouri, there is no method to capture rates of non subsidized providers in this category of care. Therefore, families have access to any 4 or less provider willing to accept the state rate and meet the child care registration requirements.

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

Maximum funding levels for child care subsidy is determined by appropriations. Rates are set using the following criteria: state geographic areas; type of facility (center, group or family home/licensed or registered); duration of care (full, half or part day); and age of the child.

d) Describe how in-home care payment rates are set:

Maximum funding levels for child care subsidy is determined by appropriations. Rates are set using the following criteria: state geographic areas; type of facility (center, group or family home/licensed or registered); duration of care (full, half or part day); and age of the child.

2.7.6. Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies? Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates and amount and also indicate if the rates were set based on the MRS or another process.

Effective Date: 01-OCT-13

☑ Differential rate for nontraditional hours.
Describe:

Providers who provide evening and weekend care receive a 15% differential to their base rate.

☑ Differential rate for children with special needs as defined by the State/Territory.

Describe:

Special needs children's base rates receive a 25% differential. This rate differential is provided to support the higher level of care needed for special needs children, which includes child welfare children. This rate differential is child specific.

☑ Differential rate for infants and toddlers.
Describe:

The rates for infants and toddlers are higher than preschool and school age rates. These rates are higher as a result of the level of care infants/toddler need and the demand for infant/toddler care which can be difficult for parents to find as availability is limited. The higher rate is provided to support and encourage providers to meet the demands of the infant/toddler population.

☐ Differential rate for school-age programs.
Describe:

☑ Differential rate for higher quality as defined by the State/Territory.
Describe:

Providers who become accredited receive a 20% differential to their base rate.

☐ Other differential rate.
Describe:

☐ None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples http://www.acf.hhs.gov/programs/occ/resource/im2011-06), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

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

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

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

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

☐ Other.
Describe:

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

a) Number of absent days allowed. Describe

Payment for absences and/or holidays is allowable only for the units when a child would normally be in care. An absence is any day the facility is open for business with other children receiving child care services and an authorized child is not in attendance. A holiday is any day the facility is closed during normal operating hours and no children are in care. This includes, but is not limited to standard legal holidays, local holidays, the facility closing due to inclement weather, or a provider vacation.
Payment may be made at the child's authorized level of care (Full-, Half-, or Part-Time) when the child is not in attendance, subject to the following limitations, as long as the child attended a minimum of one (1) unit in the month:

• A maximum of five (5) absence and/or holiday units per month for children authorized to attend 20 or more units per month.
• A maximum of three (3) absence and/or holiday units per month for children authorized to attend two (2) to 19 units per month.
   To view the absence and holiday policy go to http://dss.mo.gov/cd/childcare/
To view the continuity of care policy go to http://dss.mo.gov/cd/childcare/

b) Paying based on enrollment. Describe

N/A.

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

N/A.

d) Using electronic tools(automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe

The lead agency has an online billing system, called the Child Care Online Invoice System (CCOIS) , for provider billing which is accessible to all providers. The lead agency use direct deposit for provider payment. Licensed child care providers are required to use the CCOIS and to receive payment through direct deposit. The lead agency plans to move towards implementing direct deposit and online billing with all its providers.

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

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

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

A full range of providers are available to families receiving child care subsidy through the rate differentials offered to providers. Parental choice offers families the ability to access licensed, licensed exempt and registered family/neighbor providers. Approximately 70% of children served in through child care program are in licensed child care facilities. Licensed providers caring for 50% or more state subsidized children receive a 30% disproportionate share rate differential added to their base rate. For example, while the licensed child care center base rate ceiling stands at the 38^{th} percentile at $27.52 per day, with this 30% differential the rate would increase to $35.78. The 75^{th} percentile equates to $50.00. Providers who become accredited receive a 20% differential to their base rate. Providers who provide evening and weekend care receive a 15% differential to their base rate. Providers serving special needs children receive a 25% differential to their base rate, which is child specific.

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

 Licensed providers caring for 50% or more state subsidized children receive a 30% disproportionate share rate differential added to their base rate. For example, while the licensed child care center base

rate ceiling stands at the 38th percentile at $27.52 per day, with this 30% differential the rate would increase to $35.78. The 75th percentile equates to $50.00. Providers who become accredited receive a 20% differential to their base rate. Providers who provide evening and weekend care receive a 15% differential to their base rate. Providers serving special needs children receive a 25% differential to their base rate, which is child specific. The current payment rate ceiling is defined as the evening/weekend rate. For licensed centers that ceiling is at the 20th percentile for base rate and licensed family homes ceiling is at the 30th percentile. Because of the very limited number of group homes in the state, establishing a percentile for group homes is not representative.

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

Available child care is affordable when the cost of care does not exceed approximately ten percent of a family's gross income, less medical insurance premiums. This ten percent includes any sliding fee a family is required to pay. This ten percent does not include federal, state, or local child care subsidy. State child care rates are set using different critieria which includes geographic areas that takes into consideration the cost of living for that area.

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

Licensed providers and non-licensed regulated providers (religious exemption allowed) receive higher rates than licensed exempt registered providers. Children receiving child care servies from licensed and registered providers equals approximately 70% of the those served. A rate differential is available for accredited providers.

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

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

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

Review, Revise, Streamline, Expand, etc.)

Goal #1:
Identify and select an electronic time and attendance system, prior to the implementation of Missouri's new eligibility determination system.

Goal #2:
Continue to revise policy and provide technical assistance to assist child care eligibility staff in meeting 95% of case accuracy rate.

PART 3

Health and Safety and Quality Improvement Activities

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

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

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

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

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child

care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

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

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

Effective Date: 01-OCT-13

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))
☐ Yes.
☑ No.
Please identify the State or local (if applicable) entity/agency responsible for licensing:
 Department of Health and Senior Services, Section for Child Care Regulation

b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.
Missouri recognizes licensing requirements to be the foundation for which health and safety standards are built. DSS works very closely with DHSS, who is the licensing agency in the state, in ensuring licensed providers maintain licensing requirements if they are participating in the child care subsidy program. Because Missouri recognizes certain categories of unlicensed/unregulated care to be legally operating, DSS will allow these categories of legal operations to participate in the child care subsidy program. However, these programs must meet CCDF Health and Safety requirements and must self declare their compliance at the time they register/re-register with the program.

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

	Center-Based Child Care	Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care ☑ N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	☑	☑	☑	☐
Yes, for some providers in this category	Describe Licensed centers and Religious and Inspected Compliant Providers.	Describe Licensed.	Describe Missouri law allows providers caring for four or fewer children not related to the provider are not required to be licensed.	
No	☐	☐	☐	☐
Other	Describe	Describe	Describe	Describe

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

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?

Center-Based Child Care	Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of center-based settings are subject to licensing in your State/Territory A child day care center or center, whether known or incorporated under another title or name, is a child care program conducted in a location other than the provider's permanent residence, or separate from the provider's living quarters, where care is provided for children not related to the child care provider for any part of the twenty-four (24)-hour day.	Describe which types of center-based settings are exempt from licensing in your State/Territory. Religious based centers, school-based child care centers, summer camps and nursery school.
Group Home Child Care N/A. Check if your State/Territory does not have group home child care. ☐	Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of group homes settings are subject to licensing A group day care home where care is given by a person licensed as a group day care home provider for eleven (11), but not more than twenty (20), children not related to the child care provider for any part of the twenty-four (24)-hour day.	Describe which types of group homes are exempt from licensing: All group home child care providers are subject to the state's licensing requirement.

Family Child Care	Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work. **Reminder** - Do not respond if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	Describe which types of family child care home providers are subject to licensing A family day care where care is given by a person licensed as a day care home provider for no more than ten (10) children not related to the provider for any part of the twenty-four (24)-hour day.	Describe which types of family child care home providers are exempt from licensing: Family home providers who care for four or fewer children who are not related to the provider are exempt from licensure.
In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. **Reminder** - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	☑ N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing	Describe which types of in-home child care providers are exempt from licensing

 Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid's website at http://nrckids.org/CFOC3 to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's:**
☑

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

*American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.* Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online: http://nrckids.org/CFOC3

	For each indicator, check all requirements for licensing that apply, if any.			
Indicator	**Center-Based Child Care**	**Group Home Child Care** ☐ N/A. Check if your State/Territory does not have group home child care.	**Family Child Care**	**In-Home Care** ☑ N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)

Do the licensing requirements include **child:staff ratios and group sizes?** If yes, provide the ratio for age specified.	☑ Yes, Child:staff ratio requirement:	☑ Yes, Child:staff ratio requirement:	☑ Yes, Child: staff ratio requirement.	☐ Yes, Child: staff ratio requirement.
	Infant ratio (11 months): 1:4	Infant ratio (11 months): 1:4	List ratio requirement by age group:	List ratio requirement by age group:
	Toddler ratio (35 months): 1:5	Toddler ratio (35 months): 1:8	If there is one adult provider, the home may be licensed for up to six children including a maximum of three children under age two, or for up to ten children including a maximum of two children under age two, or both. If only four children are present, all the children may be under the age of two. If the provider has an assistant present, the home may be licensed for up to ten children including a maximum of four children under age two or for up to eight children who may all be under age two.	☐ No ratio requirements.
	Preschool ratio (59 months): 1:10	Preschool ratio (59 months): 1:10		☐ Yes, Group size requirement.
	☐ No ratio requirements.	☐ No ratio requirements.		List ratio requirement by age group:
	☑ Yes, Group size requirement Infant group size (11 months): 8	☑ Yes, Group size requirement Infant group size (11 months): 8		☐ No group size requirements.
	Toddler group size (35 months): 16	Toddler group size (35 months): 16		
	Preschool group size (59 months): None	Preschool group size (59 months): None		
	☐ No group size requirements.	☐ No group size requirements.	☐ No ratio requirements.	
			☑ Yes, Group size requirement.	

			List ratio requirement by age group: If there is one adult provider, the home may be licensed for up to six children including a maximum of three children under age two, or for up to ten children including a maximum of two children under age two, or both. If only four children are present, all the children may be under the age of two. If the provider has an assistant present, the home may be licensed for up to ten children including a maximum of four children under age two or for up to eight children who may all be under age two. ☐ No group size requirements.	

Do the licensing requirements identify specific experience and educational **credentials for child care directors?**	☐ High school/GED	☐ High school/GED	☐ High school/GED	☐ High school/GED
	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)
	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential
	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree
	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree
	☐ No credential required for licensing	☐ No credential required for licensing	☑ No credential required for licensing	☐ No credential required for licensing
	☑ Other:	☑ Other:	☐ Other:	☐ Other:
	Requirements are based on the licensing capacity.	Requirements are based on licensing capacity.		

Do the licensing requirements identify specific educational **credentials for child care teachers?**	☐ High school/GED	☐ High school/GED	☐ High school/GED	☐ High school/GED
	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)	☐ Child Development Associate (CDA)
	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential	☐ State/ Territory Credential
	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree	☐ Associate's degree
	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree	☐ Bachelor's degree
	☑ No credential required for licensing	☑ No credential required for licensing	☑ No credential required for licensing	☐ No credential required for licensing
	☐ Other:	☐ Other:	☐ Other:	☐ Other:
Do the licensing requirements specify that directors and caregivers must attain a specific number of **training hours per year?**	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year	☐ At least 30 training hours required in first year
	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year	☐ At least 24 training hours per year after first year
	☐ No training requirement	☐ No training requirement	☐ No training requirement	☐ No training requirement
	☑ Other: 12 hours	☑ Other: 12 hours	☑ Other: 12 hours	☐ Other:

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

☑ Yes.
Describe:

The DHSS, Section for Child Care Regulation (SCCR) has promulgated regulatory rules related to safe sleep practices, required written emergency preparedness plans, and CPR and First Aid requirements. The promulgation of regulatory rules related to outdoor supervision for group homes, centers and family homes has been initiated. The proposed rule change will require child/ratios to be the same as indoor. The state legislators have filed legislation requiring national fingerprinting for child care staff.

☐ No.

3.1.2 Enforcement of Licensing Requirements

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

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

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

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

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
☑ Center-Based Child Care	☐ Once a Year ☐ More than Once a Year ☑ Once Every Two Years ☐ Other. Describe: N/A.	☐ Once a Year ☑ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe: N/A.
☑ Group Home Child Care ☐ N/A. Check if your State/Territory does not have group home child care.	☐ Once a Year ☐ More than Once a Year ☑ Once Every Two Years ☐ Other. Describe: N/A.	☐ Once a Year ☑ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe: N/A.
☑ Family Child Care Home	☐ Once a Year ☐ More than Once a Year ☑ Once Every Two Years ☐ Other. Describe: N/A.	☐ Once a Year ☑ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe: N/A.

☐ In-Home Child Care ☑ N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe:	☐ Once a Year ☐ More than Once a Year ☐ Once Every Two Years ☐ Other. Describe:

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

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

Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.	☐ Yes. Describe: ☑ No. ☐ Other. Describe: N/A.

The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.	☑ An on-site inspection is conducted.
	☐ Programs self-certify.
	Describe: N//A.
	☐ No procedures in place.
	☐ Other.
	Describe: N/A.
Licensing staff has procedures in place to address violations found in an inspection.	☑ Providers are required to submit plans to correct violations cited during inspections.
	☑ Licensing staff approve the plans of correction submitted by providers.
	☑ Licensing staff verify correction of violation.
	☑ Licensing staff provide technical assistance regarding how to comply with a regulation.
	☐ No procedures in place.
	☐ Other.
	Describe: N/A.

Licensing staff has procedures in place to issue a negative sanction to a noncompliant facility.	☑ Provisional or probationary license
	☑ License revocation or non-renewal
	☑ Injunctions through court
	☑ Emergency or immediate closure not through court action
	☐ Fines for regulatory violations
	☐ No procedures in place.
	☐ Other.
	Describe: N/A.
The State/Territory has procedures in place to respond to illegally operating child care facilities.	☐ Cease and desist action
	☑ Injunction
	☐ Emergency or immediate closure not through court action
	☑ Fines
	☐ No procedures in place.
	☑ Other.
	Describe: Missouri law provides for local court jurisdiction to issue injunctions, fines, and closure for illegally operated facilities.

The State/Territory has procedures in place for providers to appeal licensing enforcement actions.	☑ Yes.
	Describe: Child care providers can appeal to the Administrative Hearing Commission or to the Circuit Court.
	☐ No.
	☐ Other.
	Describe: N/A.

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

☑ Yes.If "Yes" please use refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency
☐ No.

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

Center-Based Child Care	☑ Child Abuse Registry	☑ Initial Entrance into the System	☑ Director
		☐ Checks Conducted Annually	☑ Teaching staff
		☑ Other.	☑ Non-teaching staff
		Describe: Every 2 years at renewal.	☑ Volunteers
			☑ Other. Board President or Chairperson, Owner(s).
	☑ State/Territory Criminal Background	☑ Initial Entrance into the System	☑ Director
	☐ Check if State/Territory background check includes fingerprints	☐ Checks Conducted Annually	☑ Teaching staff
		☑ Other.	☑ Non-teaching staff
		Describe: Every 2 years at renewal.	☑ Volunteers
			☑ Other. Board President or Chairperson, Owner(s).
	☑ FBI Criminal Background (e.g., fingerprint)	☐ Initial Entrance into the System	☐ Director
		☐ Checks Conducted Annually	☐ Teaching staff
	☑ Sex Offender Registry	☑ Other.	☐ Non-teaching staff
			☐ Volunteers
			☑ Other. N/A.
			☑ Director
			☑ Teaching staff

		Describe: When the department determines that a nationwide check is warranted, the department may request a criminal record review from the Missouri State Highway Patrol for classification and search of fingerprints for any person seeking employment with the provider or for any person seeking issuance or renewal of a license.	☑ Non-teaching staff
			☑ Volunteers
			☑ Other. Board President or Chairperson, Owner(s).
		☐ Initial Entrance into the System	
		☐ Checks Conducted Annually	
		☑ Other.	
		Describe: Not a part of the rule but used as a part of the Family Care Safety Registry.	

Group Child Care Homes			
☑ **Group Child Care Homes** ☐ N/A. Check if your State/Territory does not have group home child care.	☑ Child Abuse Registry	☑ Initial Entrance into the System ☐ Checks Conducted Annually ☑ Other. Describe: Every 2 years at renewal	☑ Provider ☐ Non-provider residents of the home. N/A.
	☑ State/Territory Criminal Background	☑ Initial Entrance into the System ☐ Checks Conducted Annually ☑ Other. Describe: Every 2 years	☑ Provider ☐ Non-provider residents of the home. N/A.
	☐ Check if the State/Territory background check includes fingerprints		
	☑ FBI Criminal Background (e.g., fingerprint)	☑ Initial Entrance into the System ☐ Checks Conducted Annually ☑ Other.	☑ Provider ☐ Non-provider residents of the home. N/A.
	☑ Sex Offender Registry		☑ Provider ☐ Non-provider residents of the home. N/A.

		Describe:
		When the department determines that a nationwide check is warranted, the department may request a criminal record review from the Missouri State Highway Patrol for classification and search of fingerprints for any person seeking employment with the provider or for any person seeking issuance or renewal of a license.
		☐ Initial Entrance into the System
		☐ Checks Conducted Annually
		☑ Other.
		Describe: Not a part of the rule but used as a part of the Family Care Safety Registry.

☑ **Family Child Care Homes**	☑ Child Abuse Registry	☑ Initial Entrance into the System	☑ Provider
		☑ Checks Conducted Annually	☐ Non-provider residents of the home.
		☑ Other. Describe: Required of licensed family home providers every 2 years.	Registered family home providers and household members 17 years of age and older are required to complete a background check.
	☑ State/Territory Criminal Background	☑ Initial Entrance into the System	
		☑ Checks Conducted Annually	☑ Provider
	☐ Check if the State/Territory background check includes fingerprints	☑ Other. Describe: Required of licensed family home providers every 2 years.	☑ Non-provider residents of the home.
	☑ FBI Criminal Background (e.g., fingerprint)	☑ Initial Entrance into the System	Registered family home providers and household members 17 years of age and older are required to complete a background check.
		☐ Checks Conducted Annually	
		☑ Other.	☑ Provider
	☑ Sex Offender Registry		☐ Non-provider residents of the home.

		Describe:	This is specific to registered family home providers who serve four or fewer non-related subsidy children and only the provider is required to be fingerprinted.
		Registered family home providers are required to be fingerprinted. For licensing purposes, when the DHSS determines that a nationwide check is warranted, the department may request a criminal record review from the Missouri State Highway Patrol for classification and search of fingerprints for any person seeking employment with the provider or for any person seeking issuance or renewal of a license.	
			☑ Provider
		☑ Initial Entrance into the System	☑ Non-provider residents of the home.
		☑ Checks Conducted Annually	Registered family home providers and household members 17 years of age and older are required to complete a background check.
		☑ Other.	
		Describe: Every 2 years.	

In-Home Child Care Providers	Child Abuse Registry	Initial Entrance into the System	Provider

☑ **In-Home Child Care Providers**

☐ N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)

☑ Child Abuse Registry	☑ Initial Entrance into the System	☑ Provider	
	☑ Checks Conducted Annually	☑ Non-provider residents of the home.	
	☐ Other.		
	Describe: Required as a part of the Family Care Safety Registry for registred family home providers.	Registered family home providers and household members 17 years of age and older are required to complete a background check.	
☑ State/Territory Criminal Background	☑ Initial Entrance into the System	☑ Provider	
	☑ Checks Conducted Annually	☑ Non-provider residents of the home.	
☐ Check if the State/Territory background check includes fingerprints	☐ Other.		
	Describe: Required as a part of the Family Care Safety Registry for registred family home providers.	Registered family home providers and household members 17 years of age and older are required to complete a background check.	
☑ FBI Criminal Background (e.g., fingerprint)	☑ Initial Entrance into the System	☑ Provider	
	☐ Checks Conducted Annually	☐ Non-provider residents of the home.	
	☑ Other.	N/A.	
	Describe: If the provider allows thier registration agreement to lapse, then the fingerprint background check will have to be redone.		
☑ Sex Offender Registry		☑ Provider	
		☑ Non-provider residents of the home.	

		☑ Initial Entrance into the System	Registered family home providers and household members 17 years of age and older are required to complete a background check.
		☑ Checks Conducted Annually	
		☐ Other.	
		Describe: Required as a part of the Family Care Safety Registry for registred family home providers.	

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

<div align="right">Effective Date: 01-OCT-13</div>

d -1) The cost associated with each type of background check conducted:

$9.00

d-2) Who pays for background checks:

Employee/Employer

d-3) What types of violations would make providers ineligible for CCDF? Describe:

Child care providers who have been denied, revoked and suspended by the Department of Health and Senior Services, Section for Child Care Regulation cannot participate in the Child Care Assistance program.

d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Describe:

The Department of Health and Senior Services operates Missouri's Family Care Safety Registry as of January 2001 to protect children and their families by
providing access to background information on registered child care providers to families seeking child care. This information is accessible by a toll-free access
telephone number for parents and employers. The background screenings provide information on criminal records maintained by the Missouri State Highway
Patrol, child abuse/neglect records maintained by the Department of Social Services, employee disqualification list maintained by the Division of Aging,

child care facility licensing records maintained by the Department of Health and Senior Services, foster parent, residential care facility and child placing agency
licensing records maintained by the Department of Social Services, and residential living facility and nursing home licensing records maintained by the
Division of Aging. Evaluation of the Family Care Safety Registry is seen by the numbers of people who are turned away from becoming a child care provider.

All child care providers are required to complete a background screening through the Family Care Safety Registry.

Registered family home providers who serve four or fewer children may appeal the denial of their application if denied as result of their background screening for the provider or their household member who is 17 years of age or older. The provider has ninety (90) days to request a hearing.

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

This is not applicable.

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

Effective Date: 01-OCT-13

☑Yes.
Describe:

The Department of Health and Senior Services, Section for Child Care Regulation, created the Show Me Child Care portal for public review of child care facility inspections. These inspections were placed online for public review beginning in October, 2012. Families may go into the local office to review a child care provider's file as well.

☐No

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

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such

requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

☑

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

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

For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.				
The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☑ Physical exam or health statement for providers	☑	☑	☑	☐
☑ Physical exam or health statement for children	☑	☑	☑	☐
☑ Tuberculosis check for providers	☑	☑	☑	☐
☐ Tuberculosis check for children	☐	☐	☐	☐
☐ Provider immunizations	☐	☐	☐	☐

The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
☑ Child immunizations	☑	☑	☑	☐
☑ Hand-washing policy for providers and children	☑	☑	☑	☐
☑ Diapering policy and procedures	☑	☑	☑	☐
☑ Providers to submit a self-certification or complete health and safety checklist	☐	☑	☐	☐
☑ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☑	☑	☑	☐
☐ Other. Describe:	☐	☐	☐	☐

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

For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.				
The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers

☑ Fire inspection	☑	☑	☐	☐
☑ Building inspection	☑	☐	☐	☐
☑ Health inspection	☑	☑	☑	☐
☑ Inaccessibility of toxic substances policy	☑	☑	☑	☐
☑ Safe sleep policy	☑	☑	☑	☐
☑ Tobacco exposure reduction	☑	☑	☑	☐
☑ Transportation policy	☑	☑	☑	☐
☑ Providers to submit a self-certification or complete health and safety checklist	☐	☑	☐	☐
☑ Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	☑	☑	☑	☐

☑	☑	☑	☑	☐
Other. Describe: Providers required to have written emergency preparedness plans in place.				

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

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
Child Care Centers	First Aid	First Aid is required at pre-service training.	First Aid is required on-going training.
	CPR	CPR is required for pre-service training.	CPR is a required ongoing training.
	Medication Administration Policies and Practices	N/A.	N/A.
	Poison Prevention and Safety	N/A.	N/A.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A.	N/A.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A.	N/A.
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A.	N/A.
	Physical Activities	N/A.	N/A.

	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A.	N/A.
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A.	N/A.
	Emergency preparedness and planning response procedures	N/A.	N/A.
	Management of common childhood illnesses, including food intolerances and allergies	N/A.	N/A.
	Transportation and child passenger safety (if applicable)	N/A.	N/A.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A.	N/A.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A.	N/A.
	Supervision of children	N/A.	N/A.
	Behavior management	N/A.	N/A.
	Other Describe: Twelve (12) hours of child care related training is required annually.	N/A.	N/A.
Group Home Child Care	First Aid	First Aid is a required pre-service training.	First Aid is required on-going training.

	CPR	CPR is a required pre-service training.	CPR is required on going training.
	Medication Administration Policies and Practices	N/A.	N/A.
	Poison Prevention and Safety	N/A.	N/A.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A.	N/A.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A.	N/A.
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A.	N/A.
	Physical Activities	N/A.	N/A.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A.	N/A.
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A.	N/A.
	Emergency preparedness and planning response procedures	N/A.	N/A.
	Management of common childhood illnesses, including food intolerances and allergies	N/A.	N/A.
	Transportation and child passenger safety (if applicable)	N/A.	N/A.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A.	N/A.

	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A.	N/A.
	Supervision of children	N/A.	N/A.
	Behavior management	N/A.	N/A.
	Other Describe: Twelve (12) hours of child care related training is required annually.	N/A.	N/A.
Family Child Care Providers	First Aid	First Aid is a required pre-service training.	First Aid is required on-going training.
	CPR	CPR is a required pre-service training.	CPR is required on-going training.
	Medication Administration Policies and Practices	N/A.	N/A.
	Poison Prevention and Safety	N/A.	N/A.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A.	N/A.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A.	N/A.
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A.	N/A.
	Physical Activities	N/A.	N/A.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A.	N/A.

	Recognition and mandatory reporting of suspected child abuse and neglect	N/A.	N/A.
	Emergency preparedness and planning response procedures	N/A.	N/A.
	Management of common childhood illnesses, including food intolerances and allergies	N/A.	N/A.
	Transportation and child passenger safety (if applicable)	N/A.	N/A.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A.	N/A.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A.	N/A.
	Supervision of children	N/A.	N/A.
	Behavior management	N/A.	N/A.

	Other:	N/A.	N/A.
	Describe: Twelve (12) hours of child related training is required for licensed family homes. Registered Family Home Providers complete a self-certification that the provider meets minimal health and safety requirements and the parent signs-off on the certification. A form is provided with minimal health and safety requirements as well as tips for the health and safety of the child care provider. Additionally, a Cribs Safe brouchure is provided at the time of registration.		
In - Home Child Care	First Aid	N/A.	N/A.
	CPR	N/A.	N/A.
	Medication Administration Policies and Practices	N/A.	N/A.
	Poison Prevention and Safety	N/A.	N/A.
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A.	N/A.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A.	N/A.
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A.	N/A.
	Physical Activities	N/A.	N/A.

	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A.	N/A.
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A.	N/A.
	Emergency preparedness and planning response procedures	N/A.	N/A.
	Management of common childhood illnesses, including food intolerances and allergies	N/A.	N/A.
	Transportation and child passenger safety (if applicable)	N/A.	N/A.
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A.	N/A.
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A.	N/A.
	Supervision of children	N/A.	N/A.
	Behavior management	N/A.	N/A.

	Other Describe: Registered providers are provided with a registration packet that includes information on health and safety and how to access additional training resources. Registered child care providers for the Department of Social Services (DSS) must comply with and be cleared from : background screenings as well as screening for foster care licensure revocations and child care license revocation, prior to being registered and annually thereafter. Background screenings are conducted by DSS for child abuse/neglect history in conjunction with the Missouri Highway Patrol, Criminal Records Division and FBI for state and federal criminal convictions. This information is available to applicants for child care services.	N/A.	N/A.

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

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

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

☐ Relative providers are subject to certain requirements.

Describe the different requirements:

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

http://health.mo.gov/safety/childcare/index.php

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

Registered providers are required annually to self-certify that their home meets minimum health and safety requirements. In addition, annual background screenings are required for the provider and all household members age 17 and older. Child Care Review Team choses providers to be reviewed using a risk assessment process. Registered providers may be choosen for review which includes verification that health and safety requirements have been met.

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

On-site visits may be conducted by the Child Care Review Team or by our quality contractors providing Educare services. Either type of on-site visit is used to ensure compliance with health and safety requirements. Information derived from these on-site visits is used to offer additional technical assistance to the provider, .evaluate possible changes to policy and procedures and/or the development of provider training.

b) Describe whether the Lead Agency uses background checks

All child care providers are required to complete a Family Care Safety Registry. Registered family home providers who serve four or fewer non-related children are required to complete a fingerprint background check. Also, all household members 17 and older living in the provider's home are required to complete the Family Care Safety Registry. This is applicable for unlicensed in-home providers serving CCDF children.

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

☑ Yes. If yes, what documentation, if any, is required?

Describe:

Registered family home providers are required to submit their Tuberculosis results to the lead agency for review. Providers must make their fire and tornado plans available upon request. The state agency plans to move towards unlicensed providers developing and maintaining a detailed emergency plan.

☐ No

d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements

Registered family home providers may have their registration agreement denied or revoked by the lead agency with cause.

☑ Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

3.1.5 Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs? Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities..

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☑ Yes.
Describe

Child care programs receiving funding or services are encouraged to work with their local Parents as Teachers (PAT) program. The PAT program screens children in the areas of development social/emotional development, language, health hearing and vision. The Department of Health and Senior Services provides funding for inclusion services to support mental health, developmental disabilities, and vision and hearing services through local child care resource and referral offices, which are open to licensed and unlicensed child care providers. Also, Early Head Start partners with child care providers and offers developmental, sensory, and behavioral, screenings for children.

☐ No
a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

☑ Yes.
Describe

Training and technical assistance are available through Educare providers..

☐ No
☐ Other.
Describe

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

☑ Yes.
Describe

Training and technical assistance are available through Educare providers. In collaboration with local PAT programs, child care programs and families receive resources and support on the development of the children in their care through the screenings provided.

☐ No
☐ Other.
Describe

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

☐ Yes. If Yes, provide the name of the tool(s)

☐ No
☑ Other.
Describe

The Department of Health and Senior Services through the Maternal Child Health grant provide technical assistance to child care providers and families to allow children with special needs to be served appropriately in the child care setting. The Inclusion Program also provides training for providers using the 14 module-based curriculum, "A Place for All Children: Learning about Inclusion".

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

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

☑ Number of licensed programs.
Describe (optional):

☑ Numbers of programs operating that are legally exempt from licensing.
Describe (optional):

☑ Number of programs whose licenses were suspended or revoked due to non-compliance.
Describe (optional):

☑ Number of injuries in child care as defined by the State/Territory.
Describe (optional):

☑ Number of fatalities in child care as defined by the State/Territory.
Describe (optional):

☑ Number of monitoring visits received by programs.
Describe (optional):

☑ Caseload of licensing staff.
Describe (optional):

☑ Number of programs revoked from CCDF due to non-compliance with health and safety requirements.
Describe (optional):

☐ Other.
Describe:

☐ None.

b) **Performance measurement.** What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?
None.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at

outcomes in programs or the system and may be ongoing or conducted periodically.
None.

3.1.7 Goals for the next Biennium -

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

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

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

Goal #1:
Place 100% of substantiated child care complaint investigations on the Show Me Child Care Provider Portal.

Goal #2:
Expand access to online training child care providers on topics of immunization, inclusion and other health and safety topics.

Goal #3:
Collect and analyze data from Missouri Child Care Inspection System to target training needs and reporting.

Goal #4:
Provide information as needed for proposed legislation requiring national background screenings for all child care workers to the General Assembly.

NEW!

CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please follow this link http://www.acf.hhs.gov/programs/occ/resource/government-performance-and-results-act-gpra-measures to see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have added a ruler icon

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

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

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

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

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

If yes, insert web addresses, where possible:

http://dese.mo.gov/eel/el/PreK_Standards/index.htm

Which State/Territory agency is the lead for the early learning guidelines?

Department of Elementary and Secondary Education

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

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Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	☐	☑	☐
Social and emotional development	☐	☑	☐
Approaches to learning	☐	☑	☐
Logic and reasoning (e.g., problem-solving)	☐	☑	☐
Language development	☐	☑	☐
Literacy knowledge and skills	☐	☑	☐
Mathematics knowledge and skills	☐	☑	☐
Science knowledge and skills	☐	☑	☐
Creative arts expression (e.g., music, art, drama)	☐	☐	☐
Social studies knowledge and skills	☐	☐	☐
English language development (for dual language learners)	☐	☐	☐
List any domains not covered in the above:	☐	☐	☐
Other. Describe:	☐	☐	☐

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

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	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	☑	☐	☐
Parents using child care more broadly	☑	☑	☐
Practitioners in child care centers	☑	☑	☐
Providers in family child care homes	☑	☑	☐
Practitioners in Head Start	☑	☑	☐
Practitioners in Early Head Start	☑	☑	☐
Practitioners in public Pre-K program	☑	☑	☐
Practitioners in elementary schools	☑	☑	☐
Other. List: PAT - Parents as Teachers Program	☑	☑	☐

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

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☐ To define the content of training required to meet licensing requirements
☐ To define the content of training required for program quality improvement standards (e.g., QRIS standards)
☐ To define the content of training required for the career lattice or professional credential
☐ To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
☐ To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
☐ To develop State-/Territory -approved curricula
☑ Other.
List:

Voluntary early learning guidelines are incorporated into the professional development opportunities offered annually at the Conference on the Young Years.

☐ None.

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

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☑ Cross-walked to align with Head Start Child Development and Early Learning Framework
☑ Cross-walked to align with K-12 content standards
☐ Cross-walked to align with State/Territory pre-k standards
☐ Cross-walked with accreditation standards
☐ Other.

☐ None.

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

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

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

Early Head Start state-funded programs are required to conduct on-going assessments.

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

Progress is reported to parents through home visits. Each child has an individualized plan.

☐ No

☐ Other.
Describe:

a-2) If yes, is information on child's progress reported to parents?
☑ Yes.
Describe:

Through written reports and home visits.

☐ No

☐ Other.
Describe:

☐ No

☐ Other.
Describe:

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

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?
☐ Yes.
Describe:

☐ No

☐ Other.
Describe:

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

Describe:

☐ Samples of children.

Describe:

☐ Other.

Describe:

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

☐ No

☐ Other.
Describe:

☑ No

☐ Other.
Describe:

c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?
☑ Yes.
Describe:

Missouri has a definition for school readiness. In addition, Missouri is assigning a unique identifier to all children at school entry and thousands of younger children – those in Head Start, First Steps, Early Childhood Special Education, Voluntary Pre-K, Title 1, Parents as Teachers, etc. The Department of Elementary and Secondary Education (DESE) administers the Missouri Comprehensive Data System (MCDS), the state longitudinal data system. This system captures a limited population that includes about 14% of the DESE-supported population (i.e. Title 1, ECSE, and Missouri Preschool Project). Current goals are to have Head Start and Early Head Start children assigned a MOSIS ID, the unique identifier for the MCDS and to pilot integration of Head Start enrollment, attendance, and child well-being data. We are also working with school districts to obtain early childhood assessment data and are working on a plan to have more common assessments for children beginning at age 3. The long-term

plan is to have a set of assessments for children birth through grade 3, teachers knowledge and skills, and program quality.

☐ No

☐ Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines (Click for additional instructions)

Effective Date: 01-OCT-13

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

☑ Number/percentage of child care providers trained on ELG's for preschool aged children.
Describe (optional):

As of September 1, 2012, 339 persons have participated in the Missouri Early Learning Standards (MELS) training. The Missouri Early Learning Standards training was developed in fall of 2009. Information has not been collected on the number of parents trained or served in family support program.

☐ Number/percentage of child care providers trained on ELG's for infants and toddlers.
Describe (optional):

☐ Number of programs using ELG's in planning for their work.
Describe (optional):

☐ Number of parents trained on or served in family support programs that use ELG's.
Describe (optional):

☐ Other.
Describe:

☐ None.

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

None.

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

None.

3.2.8 Goals for the next Biennium -

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

Effective Date: 01-OCT-13

Goal #1:
The goal is to develop early learning standards for infants and toddlers along with training.

Goal #2:
Expand access to early learning standards training for ages three to five, and upon completion to the infant toddler early learning standards.

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

Effective Date: 01-OCT-13

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

N/A.

3.3.1 Element 1 - Program Standards

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

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

☐ Ratios and group size
☐ Health, nutrition and safety
☐ Learning environment and curriculum
☐ Staff/Provider qualifications and professional development
☐ Teacher/providers-child relationships
☐ Teacher/provider instructional practices
☐ Family partnerships and family strengthening
☐ Community relationships
☐ Administration and management
☐ Developmental screenings
☐ Child assessment for the purposes of individualizing instruction and/or targeting program improvement
☐ Cultural competence
☐ Other.
Describe:

☑ None. If checked, **skip to 3.3.2.**

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

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

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

☐ Licensing is a pre-requisite for participation

☐ Licensing is the first tier of the quality levels
☐ State/Territory license is a "rated" license.
☐ Other.
Describe:

☐ Not linked.

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

☐ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
☐ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
☐ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
☐ Other.
Describe:

☐ None.

3.3.2 Element 2 - Supports to Programs to Improve Quality

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

<div align="right">Effective Date: 01-OCT-13</div>

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

☐ None. **skip to 3.3.3.**

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation

☐ Attaining and maintaining licensing compliance	☐	☐	☐
☐ Attaining and maintaining quality improvement standards beyond licensing	☐	☐	☐
☐ Attaining and maintaining accreditation	☐	☐	☐
☑ Providing targeted technical assistance in specialized content areas:			
Health and safety	☑	☐	☑
Infant/toddler care	☑	☐	☑
School-age care	☑	☐	☑
Inclusion	☐	☐	☐
Teaching dual language learners	☐	☐	☐
Mental health	☐	☐	☐
Business management practices	☐	☐	☐
Other. Describe:	☐	☐	☐

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

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

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

☐ Yes.
Describe:

☐ No
☐ Other.
Describe:

.

3.3.3 Element 3 - Financial Incentives and Supports

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

Effective Date: 01-OCT-13

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

☐ None. **skip to 3.3.4.**

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

☑ Tiered reimbursement tied to quality for children receiving subsidy	☑	☑	☑
☑ On-going, periodic grants or stipends tied to improving / maintaining quality	☑	☑	☐
☐ Tax credits tied to meeting program quality standards	☐	☐	☐
☐ Other. Describe:	☐	☐	☐

3.3.4 - Element 4 - Quality Assurance and Monitoring

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

Effective Date: 01-OCT-13

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

☑ None. **skip to 3.3.5.**

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
☐ Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments.	☐ Infant/Toddler ☐ Preschool ☐ School-Age	☐	☐

☐ Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments.	☐	N/A	☐
☐ Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments.	☐	☐	☐
☐ Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programs Describe, including frequency of assessments.	☐	☐	☐
☐ Other. Describe:	☐	☐	☐

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

☐ Have a mechanism to track different quality assessments/monitoring activities to avoid duplication

☐ Include QRIS or other quality reviews as part of licensing enforcement

☐ Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

☐ Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review

☐ Other.
Describe:

☐ None.

3.3.5 - Element 5 - Outreach and Consumer Education

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

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

☐ Yes. If yes, how is it used?

☐

Resource and referral/consumer education services use with parents seeking care

☐

Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting

☐

Searchable database on the web

☐

Voluntarily, visibly posted in programs

☐

Mandatory to post visibly in programs

☐

Used in marketing and public awareness campaigns

☐

Other.

Describe:

☑ No. If no, **skip to 3.3.6.**

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

☐
Print

☐
Radio

□
Television

□
Web

□
Telephone

□
Social Marketing

□
Other.

Describe:

[ ]

□
None.

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

[ ]

3.3.6. Quality Rating and Improvement System (QRIS)

Effective Date: 01-OCT-13

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

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

□
Participation is voluntary for:

□
Participation is mandatory for:

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

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

☐ State/Territory is in the development phase
☑ State/Territory has no plans for development

☐
Other.

Describe:

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

☐
Child care centers

☐
Group child care homes

☐
Family child care homes

☐
In-home child care

☐
License exempt providers

☐
Early Head Start programs

☐
Head Start programs

☐
Pre-kindergarten programs

☐
School-age programs

☐

Other.

Describe:

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

please describe:

The DSS Educare program provides on-site training and technical assistance to registered family homes who serve 4 or fewer unrelated children and who serve subsidized children. Educare also provides supports to religious inspected compliant child care providers and schools. These services are provided through contracts with Universities and Community Partnerships in 95 out of 115 counties in Missouri.

3.3.8 Data & Performance Measures on Program Quality (Click for additional instructions)

a) Data on program quality. Indicate if the Lead Agency or another agency has access to data on:

☐

Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory.

Describe(optional)

☐

Number of programs that move program quality levels annually (up or down).

Describe(optional)

☐

Program scores on program assessment instruments.

List instruments:

Describe(optional)

☐
Classroom scores on program assessment instruments.

List instruments:

Describe(optional)

☑
Qualifications for teachers or caregivers within each program.

Describe(optional)

This information is available through the Missouri Professional Development Registry.

☑
Number/Percentage of children receiving CCDF assistance in licensed care.

Describe(optional)

The CCDF lead agency maintains this data.

☐
Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory

☐
Number/Percentage of programs receiving financial assistance to meet higher program standards.

Describe(optional)

☐
Other.

Describe:

☐
None.

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

The Lead Agency uses accreditation by a state-approved accrediting entity, as a differentiator for quality.

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

N/A.

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

Effective Date: 01-OCT-13

Goal #1:
The lead agency is pursing efforts to require First Aid and CPR for unlicensed child care providers serving four or fewer children. The goal is to have this effort initiated by September 30, 2015.

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

   Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care

system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

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

1) Core Knowledge and Competencies
2) Career Pathways (or Career Lattice)
3) Professional Development Capacity
4) Access to Professional Development
5) Compensation, Benefits and Workforce Conditions

<div align="right">Effective Date: 01-OCT-13</div>

a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

Missouri engages the child serving agencies and other public agencies such as the Missouri Departments of Social Services, Elementary and Secondary Education, Higher Education, Mental Health and Health and Senior Services. In addition we engage the Missouri Coordinating Board for Early Childhood (the State Advisory Council), Child Care Aware® of Missouri, the University of Missouri Center for Family Policy and Research, OPEN, Missouri Afterschool Network, Missouri Head Start State Collaboration Office, among others referenced in this state plan.

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

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

<div align="right">Effective Date: 01-OCT-13</div>

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

☑ Yes
☐ No, the State/Territory has not developed core knowledge and competencies. **Skip to question 3.4.2.**

☐ Other.
Describe:

If yes, insert web addresses, where possible: http://www.mopdportal.org/

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

☑ Child growth, development and learning
☑ Health, nutrition, and safety
☑ Learning environment and curriculum
☑ Interactions with children
☑ Family and community relationships
☑ Professionalism and leadership
☑ Observation and assessment
☑ Program planning and management
☑ Diversity
☑ Other.
Describe:

An emphasis has been on infants and toddlers and integrating technology.

☐ None.

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

☑ To define the content of training required to meet licensing requirements
☐ To define the content of training required for program quality improvement standards (as reported in section 3.3)
☑ To define the content of training required for the career lattice or credential
☐ To correspond to the early learning guidelines
☐ To define curriculum and degree requirements at institutions of higher education
☐ Other.
Describe:

☐ None.

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

☑ Cross-walked with the Child Development Associate (CDA) competencies

☑ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)

☐ Cross-walked with apprenticeship competencies

☐ Other.
Describe:

☐ None.

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

☑ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

The Core Competencies are organized into eight **content areas** and divided into five **levels**. The Core Competencies can be **used** by a variety of professionals in the early childhood, afterschool, and youth development fields. The Core Competencies are a foundational piece of Missouri's Professional Development (MOPD) system.

Content Areas

I. Child/Adolescent Growth and Development
Understand how children/youth acquire language and creative expression and develop physically, cognitively, and socially.

II. Learning Environment and Curriculum
Establish an environment that provides learning experiences that meet the needs, capabilities, and interests of each child/youth.

III. Child/Adolescent Observation and Assessment
Observe and assess what children/youth know and can do in order to provide curriculum that meets their developmental and learning needs.

IV. Families and Communities
Work collaboratively with families and agencies/organizations to meet identified needs and to encourage the community¿s involvement with early childhood education and youth development.

V. Health, Safety, and Nutrition
Establish and maintain an environment that ensures the healthy development, safety, and nourishment of children/youth.

VI. Interactions with Children
Establish supportive relationships with children/youth and guide them as individuals and as a part of a group.

VII. Program Planning and Development
Establish, implement, and evaluate an early childhood, school-age/after-school, or youth development program.

VIII. Professional Development and Leadership
Serve children, youth, and families in a professional manner and participate in the community as a representative of early childhood or youth development field.

Levels

Each content area is divided into five levels. The levels of competency establish a continuum from the preliminary skills necessary to enter the field to an advanced level of academic preparation and varied experience. Professionals progress from one level to another through a combination of formal study and reflection on practice. Depending on the professional's role, setting, or experience, she or he may have skills at varying levels in the different areas.

☑ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

The Core Competencies are organized into eight **content areas** and divided into five **levels**. The Core Competencies can be **used** by a variety of professionals in the early childhood, afterschool, and youth development fields. The Core Competencies are a foundational piece of Missouri's Professional Development (MOPD) system.
Content Areas
I. Child/Adolescent Growth and Development
Understand how children/youth acquire language and creative expression and develop physically, cognitively, and socially.
II. Learning Environment and Curriculum
Establish an environment that provides learning experiences that meet the needs, capabilities, and interests of each child/youth.
III. Child/Adolescent Observation and Assessment
Observe and assess what children/youth know and can do in order to provide curriculum that meets their developmental and learning needs.
IV. Families and Communities
Work collaboratively with families and agencies/organizations to meet identified needs and to encourage the community¿s involvement with early childhood education and youth development.
V. Health, Safety, and Nutrition
Establish and maintain an environment that ensures the healthy development, safety, and nourishment of children/youth.
VI. Interactions with Children
Establish supportive relationships with children/youth and guide them as individuals and as a part of a group.
VII. Program Planning and Development
Establish, implement, and evaluate an early childhood, school-age/after-school, or youth development program.
VIII. Professional Development and Leadership
Serve children, youth, and families in a professional manner and participate in the community as a representative of early childhood or youth development field.
Levels
Each content area is divided into five levels. The levels of competency establish a continuum from the preliminary skills necessary to enter the field to an advanced level of academic preparation and varied experience. Professionals progress from one level to another through a combination of formal study and reflection on practice. Depending on the professional's role, setting, or experience, she or he may have skills at varying levels in the different areas.

☑ Administrators in centers (including educational coordinators, directors).

Describe:

The Core Competencies are organized into eight **content areas** and divided into five **levels**. The Core Competencies can be **used** by a variety of professionals in the early childhood, afterschool, and youth development fields. The Core Competencies are a foundational piece of Missouri's Professional Development (MOPD) system.

Content Areas

I. Child/Adolescent Growth and Development

Understand how children/youth acquire language and creative expression and develop physically, cognitively, and socially.

II. Learning Environment and Curriculum

Establish an environment that provides learning experiences that meet the needs, capabilities, and interests of each child/youth.

III. Child/Adolescent Observation and Assessment

Observe and assess what children/youth know and can do in order to provide curriculum that meets their developmental and learning needs.

IV. Families and Communities

Work collaboratively with families and agencies/organizations to meet identified needs and to encourage the community's involvement with early childhood education and youth development.

V. Health, Safety, and Nutrition

Establish and maintain an environment that ensures the healthy development, safety, and nourishment of children/youth.

VI. Interactions with Children

Establish supportive relationships with children/youth and guide them as individuals and as a part of a group.

VII. Program Planning and Development

Establish, implement, and evaluate an early childhood, school-age/after-school, or youth development program.

VIII. Professional Development and Leadership

Serve children, youth, and families in a professional manner and participate in the community as a representative of early childhood or youth development field.

Levels

Each content area is divided into five levels. The levels of competency establish a continuum from the preliminary skills necessary to enter the field to an advanced level of academic preparation and varied experience. Professionals progress from one level to another through a combination of formal study and reflection on practice. Depending on the professional¿s role, setting, or experience, she or he may have skills at varying levels in the different areas.

☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

☐ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

☐ Other.

Describe:

☐ None.

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

☑ Birth-to-three
☑ Three-to-five
☑ Five and older
☐ Other.
Describe:

☐ None.

3.4.2 Workforce Element 2 - Career Pathways

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

Effective Date: 01-OCT-13

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

☐ Yes.

Describe:

☑ No, the State/Territory has not developed a career pathway. **Skip to question 3.4.3.**

Insert web addresses, where possible:

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

☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

☐ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

☐ Administrators in centers (including educational coordinators, directors).
Describe:

☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

☐ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

☐ Other.
Describe:

☐ None.

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

☐ Infants and toddlers
☐ Preschoolers
☐ School-age children
☐ Dual language learners
☐ Children with disabilities, children with developmental delays, and children with other special needs
☐ Other.
Describe:

☐ None.

d) In what ways, if any, is the career pathway (or lattice) used?

☐ Voluntary guide and planning resource
☐ Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
☐ Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
☐ Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)
☐ Required placement for participation in scholarship and/or other incentive and support programs
☐ Required placement for participation in the QRIS or other quality improvement system
☐ Other.
Describe:

| |
| |

☐ None.

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

☐ Yes.
If yes, describe:

| |
| |

☐ No.

3.4.3 Workforce Element 3 - Professional Development Capacity

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

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

☑ Yes.
If yes, describe:

T.E.A.C.H.® Missouri has a directory of available degree programs through DESE.

☐ No.

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

☑ Yes.
If yes, describe:

Child Care Aware® of Missouri completes an annual training plan. The annual training plan is based on five key sources of information: 1) data from an annual professional development needs assessment, which is distributed each year to programs within the central region; 2) training request and feedback from child care professionals during the prior fiscal year; 3) availability of training from other sources; 4) regional collaboration meetings that gather partner agencies that also provide training and TA; 5) contract requirements from funders. The Missouri Afterschool Network offers training and technical assistance to school age child care providers .

☐ No.

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

☑ Standards set by the institution
☐ Standards set by the State/Territory higher education board
☑ Standards set by program accreditors
☐ Standards set by State/Territory departments of education
☐ Standards set by national teacher preparation accrediting agencies
☐ Other.
Describe:

☐ None.

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

☑ Training approval process.
Describe:

Training is approved by DHSS, Section for Child Care Regulation. Training submitted for approval must be completed on a topic relevant to child care and a brief outline of the training must be included. A training approval request may be denied if the training approval request is determined not to be child care related, or if the applicant does not provide adequate information to process the approval. Training must be linked to core competencies and CDA areas.

☐ Trainer approval process.
Describe:

☑ Training and/or technical assistance evaluations.
Describe:

The Missouri Afterschool Network provides technical assistance to school age programs.

☐ Other.
Describe:

☐ None.

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

☐ Yes.
If yes, describe:

☑ No.

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

☐ Yes.
If yes, describe:

☑ No.

3.4.4 Workforce Element 4 - Access to Professional Development

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

Effective Date: 01-OCT-13

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

☑ Yes. If yes, for which sectors?
☑ Child care
☑ Head Start/Early Head Start
☑ Pre-Kindergarten
☑ Public schools
☑ Early intervention/special education
☑ Other.
Describe:

Other entities serving school age children.

☐ No.

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

☑ Yes.

If yes, describe:

Child Care Aware® of Missouri and the Missouri Afterschool Network host the Missouri Workshop Calendar where anyone can go to find approved trainings for professionals in early childhood or School Age/Afterschool care.

☐ No.

Insert web addresses, where possible: http://www.mopdportal.org/

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

☑ Scholarships.
Describe:

T.E.A.C.H. Missouri offers scholarships.

☑ Free training and education.
Describe:

The DSS Educare program provides free on-site training for providers and may fund providers to attend other trainings.   DHSS, Section for Child Care Regulation offers free training to child care providers. Educare also provides training to unlicensed child care providers. The Missouri Afterschool Network provides training to school age providers.

☑ Reimbursement for training and education expenses.
Describe:

The Educare program as listed above may reimburse for training expenses for the providers enrolled in their program.

☐ Grants.
Describe:

☐ Loans.
Describe:

☐ Loan forgiveness programs.

Describe:

☑ Substitute pools.
Describe:

T.E.A.C.H. provides money for the subsitute pool.

☑ Release time.
Describe:

T.E.A.C.H. provides support to providers for release time.

☑ Other.
Describe:

All clock hour classes provided through the Child Care Aware training Academy have been developed by the National Association of Child Care Resource and Referral Agencies (NACCRRA) and are approved by the State of Missouri to meet child care licensing professional development requirements. A discount in the cost of each clock hour class is offered with the purchase of larger training packages. So, the more one wants to learn through the online trainings, the less they pay per hour.
Each clock hour class includes: a reference section citing the source of information presented, a glossary of terms, audio controls allowing you to have the slides read to you, and related quizzes and/or activities. Certificates can be printed out upon successful completion of each class (70%+ on the exit assessment). Courses available cover a range of topics including CDA credential training, CDA renewal, and child abuse awareness for both family child care and center staff.

☐ None.

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

☑ Yes.
If yes, describe:

Only through T.E.A.C.H. Missouri.

☐ No.

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

☑ Yes.
If yes, describe:

The Educare program includes coaches to provide technical assistance to child care providers and their workforce. Also, the inclusion services specialist provides support to child care providers serving children with mental health, developmental disabilities, vision and hearing needs. The Missouri Afterschool Network provides support to afterschool programs. Department of Health and Senior Services, Health Consulants provide training to child care providers throughout the state.   Child Care Aware of Missouri provides training to licensed child care proivders.

☐ No.

3.4.5 Workforce Element 5 - Compensation, Benefits and Workforce ConditionsDefinition - For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

Effective Date: 01-OCT-13

a) Does the State/Territory have a salary or wage scale for various professional roles?

☐ Yes.
If yes, describe:

☑ No.

b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

☑ Yes.
If yes, describe:

The T.E.A.C.H. Missouri Scholarship program provides bonuses.

☐ No.

c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

☐ Yes.
If yes, describe:

[ ]

☑ No.

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

☐ Yes.
If yes, describe:

[ ]

☑ No.

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

Effective Date: 01-OCT-13

a) Data on the child care workforce. Indicate if the Lead Agency or another agency has access to data on:

☑ Data on the size of the child care workforce.
Describe (optional):

☑ Data on the demographic characteristics of practitioners or providers working directly with children.
Describe (optional):

☑ Records of individual teachers or caregivers and their qualifications.
Describe (optional):

☑ Retention rates.
Describe (optional):

☑ Records of individual professional development specialists and their qualifications.
Describe (optional):

☑ Qualifications of teachers or caregivers linked to the programs in which they teach.
Describe (optional):

☑ Number of scholarships awarded .
Describe (optional):

☑ Number of individuals receiving bonuses or other financial rewards or incentives.
Describe (optional):

☐ Number of credentials and degrees conferred annually.
Describe (optional):

☑ Data on T/TA completion or attrition rates.
Describe (optional):

☐ Data on degree completion or attrition rates.
Describe (optional):

☐ Other.
Describe:

☐ None.

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition - For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

☑ Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

☑ Staff working directly with children in centers, including aides, assistants, teachers, master teachers.
Describe:

Use of the registry is voluntary for all staff working in Centers..

☑ Providers working directly with children in family child care homes, including aides and assistants.
Describe:

Use of the registry is voluntary for all staff working in family child care homes .

☑ Administrators in centers (including educational coordinators, directors).

Describe:

Use of the registry is voluntary for Administrators working in child care centers.

☑ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).
Describe:

Use of the registry is voluntary for technical assistance providers.

☑ Education and training staff (such as trainers, CCR&R staff, faculty).
Describe:

Use of the registry is voluntary for education and training staff.

☐ Other.
Describe:

☐ None.

b-2) Does the workforce data system apply to:

☑ all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?
☑ all practitioners working in programs that receive public funds to serve children birth to age 13?
☐ No.

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

The Missouri Professional Development Registry through OPEN is voluntary. The total number of participants in the Registry and by employment setting, education, and training completion are measures of performance. Another is the number of individuals who have a MOPD ID, the unique identifier used by the registry and training approval system to track attendance of providers at approved trainings.

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

N/A.

3.4.7 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

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

Effective Date: 01-OCT-13

Goal #1:
Ensure 100% of approved training for clock hours aligns with core competencies.

Goal #2:
Ensure 100% of licensed child care providers access and utilize the Missouri Professional Development Portal by September 30, 2015.

Goal #3:
Increase access and participation in approved online clock-hour training.