1 Define CCDF Leadership and Coordination with Relevant Systems

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

1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:
Name of Lead Agency: The Pennsylvania Department of Human Services

Street Address: P.O. Box 2675

City: Harrisburg

State: Pennsylvania

ZIP Code: 17105

Web Address for Lead Agency: www.dhs.pa.gov

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Teresa

Lead Agency Official Last Name: Miller

Title: Secretary

Phone Number: 717-787-2600

Email Address: teresamill@pa.gov

1.1.2 Who is the CCDF Administrator?

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Suzann

CCDF Administrator Last Name: Morris
Title of the CCDF Administrator: Deputy Secretary, Office of Child Development and Early Learning

Phone Number: 717-346-9320

Email Address: suzmorris@pa.gov

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

Street Address: 333 Market Street, Sixth Floor
City: Harrisburg
State: Pennsylvania
ZIP Code: 17126

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

CCDF Co-Administrator First Name: Terry
CCDF Co-Administrator Last Name: Shaner Wade

Title of the CCDF Co-Administrator: Director, Bureau of Operations and Monitoring

Description of the role of the Co-Administrator: Primary point of contact for the CCDF plan, plan coordinator and cross-systems coordinator.

Phone Number: 717-346-9323
Email Address: tshaner@pa.gov

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

Street Address: 333 Market Street, Sixth Floor
City: Harrisburg
State: Pennsylvania
ZIP Code: 17126
1.2 CCDF Policy Decision Authority

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

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

☐ All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.

☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

1. Eligibility rules and policies (e.g., income limits) are set by the:
   ☐ State or territory
   ☐ Local entity (e.g., counties, workforce boards, early learning coalitions).
   If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

☐ Other.
Describe:

2. Sliding-fee scale is set by the:
☐ State or territory

☐ Local entity (e.g., counties, workforce boards, early learning coalitions).

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

☐ Other.
Describe:

3. Payment rates are set by the:

☐ State or territory

☐ Local entity (e.g., counties, workforce boards, early learning coalitions).

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

☐ Other.
Describe:

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

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

a) Who conducts eligibility determinations?

☐ CCDF Lead Agency

☑ Temporary Assistance for Needy Families (TANF) agency

☐ Other state or territory agency

☐ Local government agencies, such as county welfare or social services departments
b) Who assists parents in locating child care (consumer education)?

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

Describe

Early Learning Resource Centers

c) Who issues payments?

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

Describe

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

Early Learning Resource Centers (ELRCs) administer the program through grants awarded by the Department of Human Services (DHS). The DHS Office of Child Development and Early Learning (OCDEL) monitors grantee performance, including completion of administrative and implementation responsibilities, through reports, data analysis, program metrics, and case file reviews. The written agreements are composed of a Technical Submittal, a Cost Submittal, various appendices and the grant signature page. The Technical Submittal is completed by the ELRC to document how it will meet the grant requirements, a statement of the problem, a summary of the organization's management, the organization's prior experience, personnel and training plans, the organization's financial capability, their work plan, and how they will manage reports and controls. The appendices to the agreement include lobbying certification and disclosure, domestic workforce utilization, Iran-free procurement certification, a corporate reference questionnaire, a trade secret confidential proprietary information notice form, and business associate addendum as well as a contract "standard terms and conditions" common to all contracts, grants and agreements secure by the Department. For the subsidized child care program, ELRCs are monitored in two key areas, compliance with the eligibility requirements and operational performance standards. Compliance evaluates if the ELRC met the following objectives: The agency maintains and processes eligibility forms for all (Low Income, Former TANF and TANF) subsidy clients accurately and timely; The agency utilizes the correct regulations for all priority groups (TANF, Former TANF and Special Needs) and processes those cases correctly; The agency determines that the parent/caretaker is meeting the eligible definition of parent/caretaker; The agency determines that the parent/caretaker resides in Pennsylvania and the county of application; The agency determines that the child(ren) receiving child care is/are qualified based on the regulations for age and citizenship; The agency determines that the hours of
care provided to the child(ren) are based on the parent/caretaker(s) work/education/training hours and their documented need for care; The agency determines that the parent/caretaker(s) meet the work/education/training requirement based on their documented circumstances and eligibility criteria; The agency utilizes the correct income calculation and determines eligibility correctly based on all verification provided by the parent/caretaker; The agency determines that the household income meets the state's family gross income within the specified FPIG guidelines; The agency determines the amount of subsidy payment authorized based on income, family size, the Maximum Child Care Allowance (MCCA) payment rate schedule, and assesses the correct co-pay; The agency determines that the child care services are provided by a center based, group based, family child care provider, relative provider, or in-home care provider that is legally operating and eligible to receive child care subsidies; The agency assures that all child care providers meet the regulatory requirements and are paid rates according to their specified county's MCCA rate scale and the rates are entered into the data base system correctly and paid timely.

There are nine standards falling into three categories for operational performance standards; they are Customer Service: Objective 1 - The agency provides comprehensive information on all agency services, provides timely response to all inquiries and resolves complaints in a timely and professional manner. Objective 2 - The agency provides comprehensive and consistent Parent Education, Information, and Resource and Referral services regarding all OCDEL programs and community programs. Caseload Management: Objective 1 - The agency processes case actions for authorized cases within the timeframes established by OCDEL. Objective 2 - The agency processes case actions for redeterminations within the timeframes established by OCDEL. Objective 3 - The agency processes and manages information received in their inboxes and update inboxes within the timeframes established by OCDEL. Administrative Management: Objective 1 - The agency manages their service allocations in a manner that maximizes expenditures, available funds, and encumbrances. Objective 2 - The agency timely and accurately manages Family Support Services Expenditures. Objective 3 - The agency timely and accurately submits reports and other financial information as requested by OCDEL. Objective 4 - The agency timely and accurately manages the staff training plan. For the quality rating improvement system, ELRC performance is measured through the following objectives: Data is accurately entered and maintained in state-defined data management systems in a timely manner. Define, collect, and analyze data-rich reports to inform the decision making of the Key. Distribute reports to Early Learning, School-Age, and stakeholder community. Respond to OCDEL report requests (both scheduled and special requests) within timeframes. The grantee plans,
coordinates, implements, and assesses status of state and agency
deliverables/requirements within defined timeframes. Regional Leadership Council (RLC) is
assessed considering the diversity of membership, regional collaboration/partnership.

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

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

Information about systems and technology supporting the CCDF program is made available
upon request. Requestors, including other states, are directed to Pennsylvania’s Project
Management team at the Bureau of Information Systems (BIS). BIS coordinates the sharing
of requested information. Pennsylvania has responded to requests from a number of other
states, some of which received system coding information to support the development of
their IT systems.

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

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

DHS holds all personally identifiable information about children and families receiving CCDF
assistance confidential. Through the ELRC grants and regulations for its CCDF program,
DHS and OCDEL require ELRCs to keep case file information about children and families
confidential and in a secure location. Data about families participating in the subsidized child care program that cannot be shared includes names, dates of birth, home addresses, work addresses, phone numbers, email addresses, and any other information that would enable unique identification of an individual. This information is held secure by ELRC grantees through secure files and information technology systems that can only be accessed by users with pre-approved, verified-need basis. Aggregate data about family participation in the subsidized child care program, such as numbers of families in a particular geography, numbers and ages of children enrolled in services, can be shared if the aggregate number is more than 10. The Pennsylvania Department of Human Services prohibits sharing of aggregated data of 10 or less as low numbers for a particular geography may enable unique identification of an individual. Aggregate data that is shared must be formally requested in writing. The requestor must specify the parameters of the request, the reason the data is needed, the intended use of the data, and the date by which they would like to receive the data. No information is released until the resulting data has been reviewed and approved by the Department’s Data Governance protocol. Such requests are submitted by advocacy and research groups for the purposes of forwarding funding proposals and recommendations, making decisions about where to make investments and to answer research questions. Aggregate data is shared electronically through the use of secure email and websites. Data about relative providers is maintained the same way family data is maintained. However, information about regulated providers, including those participating in the Keystone STARS program, is public and is made available through the COMPASS provider search function at www.findchildcare.pa.gov and through a quarterly posting of all licensed child care facilities to the OCDEL research website at www.findchildcare.pa.gov.

1.3 Consultation in the Development of the CCDF Plan

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

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

The plan was made available for public comment from April 27, 2018 through May 26, 2018. A public hearing was conducted April 30, 2018 in Harrisburg; May 8, 2018 in Philadelphia and May 9, 2018 in Pittsburgh. Local governments and municipalities were invited to participate. All comments and testimony were collected and compiled and used in the development of the plan. Representatives from the Pennsylvania Child Care Association, Public Citizens for Children & Youth, Pennsylvania Association for the Education of Young Children, Pa Partnerships for Children, the City of Philadelphia and Department of Health, the People's Emergency Center, Public Health Management Corporation, WITF Media Group, District 1199 C Training and Upgrading Fund, Parent-Child Home Program, the Foundation for Delaware County, the Allegheny Department of Human Services, the Food Trust, the YWCA of Greater Pittsburgh, the Early Care and Education Consortium, and the County of Chester were among many groups that submitted over 300 comments on the development of the plan.
b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The Early Learning Council (ELC) serves as Pennsylvania's official state advisory council. Pennsylvania's CCDF Plan for FFY 2019 through 2021 was vetted with the ELC 3/29/2018 during a meeting. The consultation occurred in advance of the posting of the plan for public comment.

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

N/A

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

The plan was made available for public comment from April 27, 2018 through May 26, 2018. A public hearing was conducted April 30, 2018 in Harrisburg; May 8, 2018 in Philadelphia and May 9, 2018 in Pittsburgh. All entities, agencies, and organizations having a stake in the plan were invited to participate. All comments and testimony were collected and compiled and used in the development of the plan. Representatives from the Pennsylvania Child Care Association, Public Citizens for Children & Youth, Pennsylvania Association for the Education of Young Children, Pa Partnerships for Children, the City of Philadelphia and Department of Health, the People's Emergency Center, Public Health Management Corporation, WITF Media Group, District 1199 C Training and Upgrading Fund, Parent-Child Home Program, the Foundation for Delaware County, the Allegheny Department of Human Services, the Food Trust, the YWCA of Greater Pittsburgh, the Early Care and Education Consortium, and the County of Chester were among many groups that submitted over 300 comments on the development of the plan.
1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

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

a) Date of the public hearing. 04/30/2018

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

b) Date of notice of public hearing (date for the notice of public hearing identified in (a). 04/09/2018

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

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

The public hearing dates were announced on the DHS website, http://dhs.pa.gov/citizens/childcareearlylearning/index.htm. Notification about the public hearings were also sent out to providers and community partners through email.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The first public hearing was held at the Pennsylvania Training and Technical Assistance Network (PaTTAN), located at 6340 Flank Drive, Harrisburg, Pennsylvania. This venue was selected because of its central location in the state and its capacity to hold several hundred individuals. The second public hearing was held at 801 Market Street, Philadelphia, Pennsylvania. A third public hearing was held at the Allegheny Intermediate Unit, located at 475 East Waterfront Drive, Homestead, Pennsylvania. These locations were chosen so that hearings were held in the eastern and western
parts of the Commonwealth, as well as central Pennsylvania.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The CCDF plan was posted on the DHS website 4/27/2018. Notice of the plans availability for review and comment, along with instructions for submitting comments and the due date, were disseminated via the methods and links described at 1.3.2 b. The plan was available in English and Spanish. An executive summary of the plan was made available in English, Spanish, Mandarin and Russian.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? All comments were reviewed and correlated to the appropriate section(s) of the plan. Comments were reviewed and taken into due consideration for editing the plan before submitting to DHS leadership for final review and approval to submit to the Office of Child Care.

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

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

www.dhs.pa.gov

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

✔ Working with advisory committees.

Describe:

The plan was formally shared with the ELC in advance of and during the public comment period.

✔ Working with child care resource and referral agencies.
Describe:
Grantees for Child Care Works (CCW), Pennsylvania's subsidized child care program, and Keystone STARS, the quality rating improvement system, were invited to review and comment on the plan.

☑ Providing translation in other languages.
Describe:
The plan is available in English and Spanish. An executive summary of the plan is available in Spanish, Mandarin, and Russian.

☑ Sharing through social media (e.g., Twitter, Facebook, Instagram, email).
Describe:
The plan will be shared through DHS social media accounts as well as Pennsylvania's Promise for Children on Twitter, Pinterest, Instagram, YouTube, and Facebook. The professional development (PD) registry is accessible via Facebook, and the annual Pennsylvania "One Book" campaign is advertised on Facebook and Instagram.

☑ Providing notification to stakeholders (e.g., provider groups, parent groups).
Describe:
Stakeholder groups were invited to review and comment on the plan. These included but were not limited to the Pennsylvania Child Care Association (PACCA), the Pennsylvania Association for the Education of Young Children (PennAEYC), the Delaware Valley Association for the Education of Young Children (DVAEYC), Trying Together, Southeast Pennsylvania Child Care Coalition (SEPECC), Public Citizens for Children and Youth (PCCY), and Pennsylvania Partnerships for Children (PPC).

☐ Other.
Describe:
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

Include in the descriptions the goals of this coordination, such as:
- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

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

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

Describe the coordination goals and process:

OCDEL coordinates with representatives of local governments with the goal of ensuring minimum health and safety standards are met for ECE providers and to
connect capacity building supports and professional development offerings. Coordination efforts include: Information sharing as needed with local zoning agencies when information changes related to occupancy certificates; coordination with townships and their association to ensure municipalities offering summer camp for children 0-5 are licensed by DHS; coordination with local law enforcement to follow up on investigations of potential child endangerment, abuse, or fraud in child care settings; information sharing with local and regional emergency management agencies through DHS Disaster Human Services and the Pennsylvania Emergency Management Agency (PEMA) regarding the location of child care facilities. Where local government is engaged in building capacity for ECE, OCDEL participates in meetings and on local work groups with the shared goal of increasing the number of high-quality child care slots available. In Philadelphia and Pittsburgh, both local governments are striving to use local investments to increase full-day opportunities for children. OCDEL coordinates with these entities by being responsive to data requests, sharing state-level tools for technical assistance and monitoring, participating on local advisory groups, and supporting capacity building efforts. In Pennsylvania, school districts are under local control. OCDEL shares information to support enhanced early childhood to third grade continuum building. OCDEL, through Race to the Top-Early Learning Challenge grant funds, aligned Pennsylvania's Kindergarten, First, and Second Grade Standards. Upon completion, copies with ordering information were distributed to every elementary school in the commonwealth. With the goal of supporting smooth transition from early learning providers to kindergarten, OCDEL supports a website, www.papromiseforchildren.org, that posts kindergarten registration dates, age cut-offs, and family friendly resources to promote parent-child readiness activities. In addition, OCDEL provides a number of family resources to provide child development and parent engagement information in the form of consumer education material and family-focused activity resources. A list of these materials is provided to Pennsylvania legislative aids with ordering information so that they can be distributed through local constituent offices. OCDEL, their business partners (ELRCs), and the local county assistance offices (CAO) coordinate to support enrollment of TANF clients seeking child care.

☑️ (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).
Describe the coordination goals and process:
Pennsylvania’s ELC is a governor-appointed council formed to fulfill the requirements of the Head Start Act. It is composed of the Deputy Secretary of OCDEL as well as representatives of local educational agencies, institutions of higher education, local providers of early childhood education and development services, Head Start (HS) agencies including migrant and seasonal HS programs, the commonwealth's director of the HS collaboration office, and the commonwealth agency responsible for health or mental health care. Members also include the co-chair of the Pennsylvania Early Learning Investment Commission (ELIC) or the co-chair's designee, the chair of the Commonwealth's State Interagency Coordinating Council, the director of the Pennsylvania Key (PA Key), and the director of Early Intervention Technical Assistance. Also included are individuals representing families, advocacy organizations, business and industry, Intermediate Units, local governments, K-12 schools, philanthropic institutions, state corrections or law enforcement, child welfare, children's health, PD serving early learning programs and practitioners, the United Way, and any other individual who can assist the Council with the purposes outlined in the state's Executive Order. The ELC is convened at least three times a year to evaluate OCDEL's policies and to offer feedback and recommendations. Meetings are face to face and structured to 1) provide time for updates and data sharing to ensure the Council is up to date on OCDEL initiatives and 2) provide time for break-out workgroups for in-depth discussion and input on specific issues related to OCDEL initiatives and programs. Break out sessions are co-facilitated by OCDEL staff and a Council member with expertise in the topic area being discussed. In addition, the Council is periodically convened via video conferencing to address pressing issues and solicit input on time sensitive issues that arise between regularly scheduled face to face meetings. In addition, OCDEL employs a Director of External Relations who engages Council members on a regular basis outside of formal Council activities. Finally, OCDEL maintains a website with information related to the Council including member contact information; meeting agendas, materials and notes. All activities are conducted with the goals of smoothing transitions for children between programs or as they age into school, enhancing and aligning the quality of services, linking comprehensive services to children in child care settings, and developing the supply of quality care for vulnerable populations.
Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

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

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

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

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

Describe the coordination goals and process:

The IDEA Part C (Infant and Toddlers Early Intervention program) and IDEA Part 619 (Preschool Early Intervention program) are administered through OCDEL. Through the Bureau of Early Intervention Services and Family Supports, OCDEL coordinates with child care supported by CCDF funds as well as other child care and early learning programs. Stakeholders are brought together through a combined meeting of the IDEA-required Interagency Coordinating Council and OCDEL’s ELC. The Bureau contracts with counties to subcontract with service providers for the Infant Toddler Early Intervention (EI) program and monitor their performance. One of the performance measures for Preschool EI is to ensure EI services are delivered within the child with a disabilities child care. Through this measure EI programs are encouraged to provide all or most of the EI services in the child care. Improving social skills for children with disabilities is a priority for the Bureau as a result EI programs are encouraged and supported to partner with their community ELRC so that they can work collaboratively to support inclusion of children with disabilities within child care. Addition, OCDEL contracts with intermediate units (IUs) and school districts to provide Preschool EI services at the local level. As occurs at the state level, local programs are encouraged to coordinate child care services, EI, and behavioral and mental health services within their community through local interagency coordinating councils. Leadership from all EI programs are brought together six times a year for updates from OCDEL, including efforts to support early learning programs, and coordination with ELRCs and behavioral health services. The Bureau monitors the EI programs to ensure they are partnering with child care, early learning programs and ELRCs. EI and early learning providers have opportunities to work to improve
local collaboration through statewide PD opportunities and regionally-based meetings.

**REQUIRED** State/territory office/director for Head Start state collaboration.
Describe the coordination goals and process:
OCDEL is the grantee for the Head Start State Collaboration Office (HSSCO). In Pennsylvania, HS agencies are exempt from child care licensure unless they are offering fee-for-service child care. The coordination goals with the HSSCO occurs primarily around capacity building for EHS-CCP. This focused on supporting the implementation of Early Head Start-Child Care Partnerships (EHS-CCP), which is described in the optional section below. In support of a shared goal to promote continuity of care, there is capacity building effort for HS is the allowance that children eligible for Early Head Start (EHS) or HS do not need to complete the child care subsidy program redetermination as long as they remain enrolled in EHS or HS. As needed, the HSSCO director is able to access all supports and have input in to planning through participation on the ELC and direct access as needed to OCDEL leadership.

**REQUIRED** State agency responsible for public health, including the agency responsible for immunizations.
Describe the coordination goals and process:
On an annual basis, the OCDEL Bureau of Certification Services shares the facility report with the Department of Health (DOH). DOH then selects providers to visit to review immunization records for the children in care. DOH and OCDEL work jointly to ensure providers comply with immunization requirements for children. OCDEL and DOH coordinated and developed a Childhood Immunization Partnership Project which is a joint effort of evaluation of child care records of immunizations. In conjunction with DOH, OCDEL headquarters staff train Certification licensing staff to ensure the goal that all children in certified child care facilities are properly immunized.

**REQUIRED** State/territory agency responsible for employment services/workforce development.
Describe the coordination goals and process:
Currently OCDEL collaborates monthly by meeting with the office of Office of Income Maintainence (OIM) to coordinate workforce development opportunities in early
childhood education. The goal is to strengthen recruitment for the ECE workforce as well as build family engagement opportunities by informing other state agencies of nationally recognized models of support. Part of this process includes blended funding from several agencies for educational and remedial coursework that can lead to stackable credentials. Jointly with Labor and Industry (L&I) and the Apprenticeship Office we are working towards the creation of a statewide ECE educator apprenticeship that results in an industry recognized credential. This process includes representatives from State agency leadership, Higher Education partners and employers, with the ultimate goal of statewide expansion.

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

Describe the coordination goals and process:
The Pennsylvania Pre-K Counts and Head Start Supplemental Assistance Programs (HSSAP) are Pennsylvania's high-quality pre-kindergarten programs. Established by PDE and administered by OCDEL with the goal of ensuring access for children and families and coordination across Pennsylvania's mixed delivery system, these programs make quality pre-kindergarten opportunities available to children and families across the commonwealth. OCDEL is an integrated office that offers opportunities for coordination across programs for child care, EI, pre-kindergarten and family support services like home visiting.

**Required** State/territory agency responsible for child care licensing.

Describe the coordination goals and process:
Child care licensing in Pennsylvania is referenced as certification and is housed within OCDEL under the authority of the Bureau of Certification Services. Certification staff conduct inspections and certify all of the child care facilities in Pennsylvania. Licensing coordinates with the Bureau of Subsidy (now Bureau of Operations and Monitoring) and the Bureau of Early Learning (now the Bureau of Operations and Professional Development) to ensure the goal is met that CCDF monies are afforded to programs that are in compliance with health and safety regulations. If a program fails to meet health and safety standards and is sanctioned or under investigation, the licensing office notifies QRIS and the STAR status of the program is suspended, thereby cutting off the additional monies that are afforded to the program. Also, if there is imminent risk to children the licensing office will order that children be immediately removed.
from the program and notifies subsidy and QRIS so monies are stopped.

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

Describe the coordination goals and process:

OCDEL coordinates with the CACFP by providing the agency a list of child care providers who have been sanctioned weekly. The process is when a program is sanctioned by OCDEL, CACFP suspends payment and purposes to terminate the program from the CACFP. The goal is that the provider must be in good standing, meeting all of the health and safety regulations and have a regular license to participate with CACFP. CACFP staff notify OCDEL of any suspected regulatory noncompliance or illegally operating facilities.

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

Describe the coordination goals and process:

OCDEL issued policy Announcement OCDEL-13 #01 "Children Experiencing Homelessness" in May 2013 and a follow-up announcement "At-Risk Tracking for Infants/Toddlers Experiencing Homelessness" in November 2014. The purpose of these announcements was to provide guidance for identifying children experiencing homelessness so that their access to quality early childhood programs under OCDEL can be improved. The announcements were applicable to all programs managed by OCDEL: EI, HSSAP, CCW (ELRC’s), DHS-certified Child Care, Pre-K Counts, and Home Visiting Programs (Parents as Teachers, Nurse-Family Partnerships, EHS, and Healthy Families America). OCDEL works with peers in PDE to identify the coordinators for services to families experiencing homelessness in each of the state’s 500 school districts. Through this collaboration, OCDEL works to identify where these families are and how it can best meet their child care needs as part of their broader plan to secure permanent, stable housing, and greater self-sufficiency. OCDEL also actively tracks information about families experiencing homelessness to determine how best to serve the educational and child care needs of those families. OCDEL convened a workgroup with PDE’s Children and Youth Experiencing Homelessness Program to develop a plan to better connect children with early childhood programs. This group also connects with the DHS Executive Housing group to ensure that early
childhood programs are an area of focus. OCDEL will work with the Executive Housing group to provide cross-systems trainings for service providers in the field of early childhood education and housing security. Beginning in November 2017, OCDEL implemented waivers for certain verification and immunization requirements for families and children experiencing homelessness. Under presumptive eligibility, families experiencing homelessness may receive up to 92 days of child care while seeking employment. Children from families experiencing homelessness are also prioritized for funding to ensure expedient connection to services. Head Start now has a 3% capacity they can hold to serve families experiencing homelessness. The Head Start Collaboration Office continues to educate the field about this new rule. OCDEL continues to present our services at the PA Education for Children and Youth Experiencing Homelessness State Conference.

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

Describe the coordination goals and process:
OCDEL works collaboratively with the Office of Income Maintenance (OIM), the office within DHS responsible for managing the TANF program. OCDEL and OIM work together to establish policies and rules for TANF child care that comply with federal requirements and that support, to the fullest extent possible, parents' efforts towards self-sufficiency, including families transitioning off TANF as a common, over-arching goal. Coordination processes include linkage of the information technology systems that support the TANF and child care programs, monthly meetings with staff, conducting mutual training for staff and subgrantees, and collaboration on the development of the regulations and policies.

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

Describe the coordination goals and process:
OCDEL’s subgrantees, the ELRCs, assist families applying for child care with applications for Medicaid and Pennsylvania's Children's Health Insurance Program (CHIP). ELRCs serve in the role of COMPASS Community Partners to assist families with using Commonwealth's Access to Social Services (COMPASS), the DHS electronic portal to assistance programs, to apply for Medicaid and CHIP. Pennsylvania's CHIP offers health coverage to all children, up to the age of 18 years,
regardless of income. Children from families qualifying for subsidized child care automatically qualify for CHIP. The goal is to provide access to health coverage to as many children as possible. Coordination processes include sharing of information from applications submitted by families for child care and medical coverage, access to data systems, and comprehensive resource and referral by the agencies responsible for both programs to insure families are connected to services.

**(REQUIRED) State/territory agency responsible for mental health**

Describe the coordination goals and process:
The Office of Mental Health and Substance Abuse Services (OMHSAS) is the state agency responsible for mental and behavioral health services across the lifespan. OCDEL and OMHSAS have a consistent collaborative meeting to support collaboration at the local, regional and state level between early childhood programs and the behavioral health system. Current coordination goals include cross-sector capacity building related to an infant and early childhood mental health competent workforce and increasing access to evidence-based prevention and intervention services. OMHSAS also provides psychological/psychiatric consultation to the Early Childhood Mental Health (ECMH) project. The ECMH Project is a child-specific consultation model available to early learning programs across PA who participate in Keystone STARS (TQRIS). The project focuses on reducing the number of children expelled from child care due to behavior challenges, increasing understanding among ECE practitioners and families of social-emotional development and its impact on educational success, and linking and bridging systems and services on behalf of the child, family, and program.

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

Describe the coordination goals and process:
In its role as a resource and referral agency, the ELRCs collaborate and coordinate services with other programs in the child care system, such as the PA Key which is responsible for PD, and PA Promise for Children, which provides consumer education materials to the public. The ELRCs convene Regional Leadership Council meetings on a quarterly basis that include local agencies, community organizations, and groups concerned with improving the quality and capacity of child care services. The goal is to
coordinate resource and referral services and identify any gaps. The ELRCs make every effort to support, not duplicate, services in the local community.

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

Describe the coordination goals and process:
The goal of The PA Key, along with the ELRCs, is to collaborate regularly with PACCA, the Pennsylvania School Age Youth Development Network (PSAYDN), and Pennsylvania School Age Care Alliance to identify trends and needs across the state as they pertain to the needs of families. All three of these are member organizations and continually stay in connection with a multitude of providers including DHS certified programs, the federally-funded 21st Century Learning Programs, and recreation-based programming. These processes include conducting needs surveys by PSAYDN and making them accessible to OCDEL, the PA Key, and partnering PD organizations. Not all school age children in Pennsylvania have access to afterschool and summer programming. Therefore, another process in place includes PSAYDN collaborating with a legislative caucus to support access and quality care through legislation. Finally, The PA Key is in the process of mapping existing programs and determining areas of need. Many programs are eligible to participate in Keystone STARS.

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

Describe the coordination goals and process:
Within Pennsylvania’s governance structure, each agency is assigned responsibilities under the State’s Emergency Operations Plan. As such, DHS is responsible for ESF #6, Mass Care, Emergency Assistance, Housing, and Human Services which coordinates the delivery of federal mass care, emergency assistance, housing, and human services when local, tribal, and state response and recovery needs exceed their capabilities. DHS has an office of Disaster Human Services which serves as the liaison between local, regional, and state agencies, PEMA, and federal offices. The coordination goals between OCDEL and Disaster Human Services has and will continue to involve communication strategies between offices, preparedness training for staff, and responsiveness in the event of an emergency. Disaster Human Services also coordinates the family reunification process during a disaster in collaboration with the Offices of Children, Youth, and Families (OCYF) and OCDEL. The primary goals of the coordination are mutual information sharing, support of preparedness at the
local and state level, and the capacity building of local, regional, and state level systems to respond to disasters. Disaster Human Services and OCDEL meet a minimum of quarterly to discuss updates and needs.

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

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

Describe

Pennsylvania was the first state-level grantee for EHS, funded under ARRA in 2009. Since then, OCDEL applied for expansion and was funded for 368 EHS-CCP slots. The coordination goals between OCDEL and EHS-CCP grantees are to fully meet the intent of this grant, provide continuity of care and offer more high-quality access to infants and toddlers. In order to accomplish these goals, OCDEL staff participate in direct communications with the regional and central Office of Head Start. In addition to the state-level grant, there are several traditional federal to local EHS-CCP grantees in PA. In coordination with the HSSCO director, meetings are routinely convened between the EHS-CCP grantees and OCDEL staff to coordinate around issues related to child care subsidy, Keystone STARS, and PD. A positive development stemming from the EHS-CCP coordination is the full payment of child care subsidy funds in addition to the EHS funds. Prior to the implementation of this initiative, programs could not receive subsidies if they were receiving alternative funding for the same segment of the day from another source. This practice has allowed programs to focus on enhanced quality in infant/toddler settings.

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

Describe

Early childhood educators work in a practice-based profession where they are responsible for helping all young children learn and support their healthy development. A goal of OCDEL is that IHE partners achieve this through providing credit-bearing professional development. In addition, OCDEL and IHE’s collaborate and streamline funding so that Higher Education is positioned to develop the knowledge, skills, and capacities needed to improve early childhood teaching and learning, relevant for the
ECE workforce. Working together on this goal means, coordination amongst IHE's, OCDEL and the Office of Postsecondary and Higher Education (OPHE). The coordination of these entities works to ensure seamless articulation between associate and bachelor degree programs. This process is critical to ensure the success of our workforce in an achievable, cost effective way. To make this change, two-year and four-year institutions of higher education (IHEs) must meet the needs of the 0-8 workforce in ways that early learning employers can help to manage. Responsive planning and communication on the part of IHE's and OCDEL is a must to make the process a collaborative success. Coordinating stakeholders in order to identify resources and supports will help increase access to higher education for the early childhood workforce. In addition to responding to regional needs, OCDEL will facilitate and organize a consortium of Higher Education partners that are providing the requisite knowledge and strongest early childhood education experience possible to incumbent and future early childhood professionals. The identified group of IHE's use the NAEYC professional preparation standards to guide their curriculum and work to create statewide course alignment. The OCDEL Director of Workforce and ECE Career Pathway Advisory Committee is focused on developing strategies and will advise state and IHE leadership on methods to ensure this process is successful. Included in this work are suggestions and plans for IHEs to offer high quality learning opportunities and apprenticeships that allow the incumbent workforce to be rewarded for their experience, increase their understanding of child development, and extend learning and reflection to the children in their program. Currently, OCDEL is supporting a local collaborative partnership in Philadelphia that is piloting a cohort apprenticeship model with the Community College of Philadelphia. The apprenticeship completes with an Associate's degree in early childhood education and over 1000 hours of clinical experience.

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

Describe

The Pennsylvania Family Centers, administered by OCDEL Bureau of Early Intervention Services and Family Supports, are funded by both state and federal funds. They received federal funds through the Safe and Stable Families grant. Pennsylvania Family Centers provide evidence-based home visiting using the Parents as Teachers (PAT) model to a maximum capacity of 2259 families. Family Centers
provide PAT evidence-based home visiting in 37 out of the 67 counties within Pennsylvania. OCDEL has brought together Family Centers with other home visiting programs such as the Maternal, Infant, Early Childhood Home Visiting (MIECHV) and IDEA Part C programs to better align their services and supports to families and their young children. The 2017-18 Home Visiting Expansion Initiative funds an additional evidence-based home visiting model, Family Check-Up, this initiative provides evidence-based home visiting services to a maximum capacity of 916 families. In the 2018-19 state fiscal year evidence-based home visiting was expanded to provide services to a maximum capacity of 679 families experiencing a substance use disorder, which added a sixth model Safe Care Augmented. In addition to the programs above Pennsylvania has state funded Nurse-Family Partnership which has a maximum capacity of 2770 families. The total capacity of families across evidence-based home visiting is: 8909 families in 66 out of 67 counties.

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

Describe

MIECHV is administered by OCDEL’s Bureau of Early Intervention Services and Family Supports. The MIECHV program provides evidence-based home visiting using four evidence-based home visiting models: PAT, Nurse-Family Partnership (NFP), EHS, and Healthy Families America (HFA) to a maximum of 2378 families. MIECHV funds evidence-based home visiting programs in 47 out of the 67 counties within Pennsylvania. MIECHV is administered by OCDEL’s Bureau of Early Intervention Services and Family Supports. The MIECHV program provides evidence-based home visiting using four evidence-based home visiting models: PAT, Nurse-Family Partnership (NFP), EHS, and Healthy Families America (HFA) to a maximum capacity of 2378 families. MIECHV funds evidence-based home visiting programs in 47 out of the 67 counties within Pennsylvania. Evidence-based home visiting programs help children and families get off to a better, healthier start. The MIECHV Program supports voluntary, evidence-based home visiting for at-risk pregnant women and parents with children up to kindergarten entry. The MIECHV Program builds upon decades of scientific research showing that home visits by a nurse, social worker, early childhood educator, or other trained professional during pregnancy and early childhood improve the lives of children and families. Home visiting helps prevent child abuse and neglect, supports positive parenting, improves maternal and child health, and promotes child
development and school readiness. All home visiting programs share characteristics; yet evidence-based models have different approaches based on family needs (e.g., some programs serve expecting parents while others serve families after the birth of a child). In these voluntary programs, trained professionals meet regularly in the homes of at-risk expectant parents or families with young children who want and ask for support, building strong, positive relationships.

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

Describe
The DHS Office of Medical Assistance Programs (OMAP) is responsible for the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program in Pennsylvania. Beyond screenings completed by physicians, child-serving programs also complete screenings, such as the OCYF, HS, home visiting programs, and IDEA Part C and Part B - 619 programs. In Pennsylvania, EPSDT services are available to all children with a disability based on the income of the child. OCDEL's subgrantees, the ELRCs, assist families applying for child care with applications for Medicaid and Pennsylvania's CHIP. Pennsylvania's CHIP offers health coverage to all children, up to the age of 18 years, regardless of income. Children from families qualifying for subsidized child care automatically qualify for CHIP. The goal is to provide access to health coverage to as many children as possible. Coordination processes include sharing of information from applications submitted by families for child care and medical coverage, access to data systems, and comprehensive resource and referral by the agencies responsible for both programs to insure families are connected to services.

State/territory agency responsible for child welfare.

Describe
OCDEL collaborates with OCYF to prioritize child care for children in foster placement. County children & youth agencies receive funds in their needs-based budgets to provide child care to foster children while they are waiting for CCDF funding. OCDEL and OCYF issued a joint bulletin requiring child care programs serving these children to participate in the state's quality rating improvement system, Keystone STARS, at a STAR 2, 3, or 4 level. The goal of these joint policies is to ensure our most vulnerable children are receiving high quality child care services in a timely manner.
State/territory liaison for military child care programs.

Describe

The School Liaison Officer, works within the Child and Youth Services program for the US Army helping address educational issues involving military children in the local school communities throughout Pennsylvania. The Outreach Services Officer, manages the patron services assisting families in locating appropriate care for their children. This includes the Parent Central Services Office, a one stop resource and referral network, Kids-on-Site Care, Volunteer Child Care in Unit Setting, Special Needs Accommodation Process), CYS Services Parents' Advisory Council, Parent Education, Special Facility Openings, and PAT/Heroes-at-Home Educators. These offices coordinate with all state and local agencies within the commonwealth to provide assistance to mobile, military families with regards to their children. Military members include active duty, reserve, National Guard, military retirees, and civilian employees of the Department of Defense. These resources for all military connected families can be found at 459 Bouquet Road Carlisle, PA 17013. Phone: 717-245-4555. The goal is to connect families in the military to all available resources, especially as it relates to their child care needs when one parent may be deployed. The coordination process includes connecting families in the military to the early learning services available through the comprehensive resource and referral processes at the local ELRC.

Provider groups or associations.

Describe

OCDEL regularly convenes various stakeholder groups comprised of providers and staff from statewide, regional, and local provider group and associations. Groups typically meet quarterly providing input on OCDEL policy and feedback on implementation. Groups are staffed by OCDEL program staff with direct responsibility for program implementation and co-chaired by stakeholders. Program staff and co-chairs work in coordination to develop meeting agendas, implement meeting activities and provide follow-up information to group members including member contact information, notes and next steps. In addition to the program staff that coordinate with co-chairs, OCDEL's Director of External Relations is charged with coordination between stakeholder groups and overall stakeholder engagement. OCDEL convenes
the following groups: PA Pre-K Counts (PKC)/Head Start Supplemental Assistance Program (HSSAP) stakeholder group. The PKC/HSSAP stakeholder group establishes a feedback loop between OCDEL and program implementors with the goals of increasing coordination and smoothing transitions for children between child care, PKC and HSSAP as well as transitions to the public school system; enhancing and aligning the quality of services for pre-K aged children; developing the supply of quality care for vulnerable populations. The Keystone STARS Think Tank is a group of stakeholders involved in the implementation of Keystone STARS, Pennsylvania’s QRIS system. This group provides ongoing feedback on the implementation of the newly re-visioned STARS program with the goals of smoothing transitions for children between programs and as they transition to the public schools; enhancing and aligning the quality of services for infants and toddlers through school-age children, developing the supply of quality care for child care works children in child care and out-of-school time settings. In addition to child care, PKC and HSSAP providers, provider groups and associations that regularly participate in these stakeholder groups include the Pennsylvania Child Care Association (PACCA) a state-wide non-profit membership group representing certified family, group home and center based child care providers, the Pennsylvania Association for the Education of Young Children, Pennsylvania’s AEYC affiliate representing high quality early learning programs along with Trying Together (formerly the Pittsburgh AEYC) and First Up (formerly the Delaware Valley AEYC), the Pennsylvania Head Start Association (PHSA), the state wide membership association representing Head Start and Early Head Start grantees.

☑️ Parent groups or organizations.

Describe

Pennsylvania’s Office of Child Development and Early Learning, has developed a variety of collaborative relationships with Parent Groups/Parent Organizations that we leverage to support our Consumer Education and Resource and Referral processes. PA Promise for Children: The PA Promise for Children website and related resources allows parents and the greater public, to access information on OCDEL’s early childhood programs in a user-friendly way. Through a website, social media, and an app (The Early Learning GPS, available in both English and Spanish) provides a multi-modal way for families to access a variety of resources, information, and make connections to OCDEL’s early learning programs. The primary goal of this website is to provide Consumer Education and support families access to resource and referral
information. Including but not limited to: accessing quality ECE programs, child care subsidy, Keystone STARS (TQRIS), early childhood learning and development (including accessing Early Intervention and Home Visiting supports), and how to connect to other community resources and supports. OCDEL will coordinate with the Pa Promise for Children website, social media platforms and related app The Early Learning GPS, to ensure that required Consumer Education information is accessible and maintained. PA Family Engagement Coalition: OCDEL has supported the development of a coalition of a variety of stakeholders focused on family engagement. This Coalition has informed the development of a Family Engagement Framework for OCDEL programs and the Pa Dept of Education. A goal for this coalition is to support the coordination of Family Engagement practices across the commonwealth. OCDEL will leverage the variety of stakeholders involved in this coalition to support access to consumer education for families, as well as to inform OCDEL on consumer education and resource and referral needs. In addition, OCDEL will provide information related to it’s efforts to support continuity of care and access to high quality care. OCDEL also has built relationships with a variety of Parent Groups/Organizations that are focused on supporting families of children with disabilities/special health care needs. PEAL Center: The federally funded Parent Center (PTI) and Family-to-Family Health Information Center (F2F) in Pennsylvania aids families of children with disabilities, educators, and others who work with them. OCDEL has and will continue to coordinate with the PEAL Center in a variety of ways, including inviting PEAL representatives as stakeholders in policy creation related to inclusive practices and the reduction of suspension and expulsion. Confidence and Competence Partners in Policymaking (C2P2 EI): For 20 years Pennsylvania's EI program worked in partnership with the Institute on Disabilities at Temple University, Pennsylvania's federally funded University Center for Excellence in Developmental Disabilities, Education, Research, and Service, to support the development of family leaders that have children receiving EI services. A primary goal of this partnership is to develop family leaders with deep knowledge of OCDEL programs and the tools to network and influence others in their community to support coordination of services and supports for families of young children with disabilities. Parents as Partners in Professional Development (P3D): P3D links family members to EI professional development and pre-service opportunities. Families share their insight and expertise in such roles as co-presenters, university guest lecturers, and publication reviewers. A goal of this network is to provides OCDEL with the ability to access family wisdom, stories, and
expertise to inform our communications related to consumer education, and promotion of accessibility and access to services. Parent to Parent of Pennsylvania: Parent to Parent of PA links families of children and adults with disabilities or special needs on a one-to-one basis with a peer supporter for purposes of support and information. A primary goal of Parent to Parent of Pa is to ensure that families of children with disabilities, have access to support and information. A goal of the coordinated process with all of these entities that have a focus of supporting families of children with disabilities, is to ensure that this population has access to quality care, consumer education, resource and referral supports that meet their needs.

Other.
Describe
The Early Learning Investment Commission (ELIC) - Founded in 2007, The Pennsylvania Early Learning Investment Commission (ELIC) is a network of senior business leaders working as knowledgeable, effective advocates to build awareness and support for increased public investments in high quality early learning programs. ELIC is a unique partnership among the Governor's Office, which established the Commission and appoints its members; OCDEL, and Team Pennsylvania Foundation, which serves as the Commission's fiscal agent. The purpose of the Commission is to secure support for public investment in early learning by focusing on practices that are educationally, economically, and scientifically sound. The larger Commission is made of of regional groups that identify strengths and goals for particular geographic regions within the state and develop an action plan for Commisioners. OCDEL staff regularly coordinates with ELIC staff to provide Commission members with data around the reach of OCDEL programs and unmet need for services across the state and within specific regions to inform their work, conduct research and analysis, create reports, and host events including visits to quality early learning programs to strengthen relationships with local providers and help members better understand the impact of OCDEL programs on children and families. The coordination of work between OCDEL and ELIC staff and members is done with the goals of increasing awareness of the connection between quality early childhood investment (that is, social, intellectual, physical, and emotional development) and a strong Pennsylvania economy; building a public-private partnership of leaders from all sectors at the state, regional, and local levels to advocate for quality early learning investment; expand access to high quality early learning opportunities in local communities for at risk children.

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

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

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start ’ Child Care Partnerships: https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?
Yes. If yes, describe at a minimum:

a) How you define "combine"
OCDEL combines funding by blending multiple streams.

b) Which funds you will combine
Funds that are combined consist of TANF, Social Services Block Grant (SSBG) and state funds. OCDEL also combines state funding for HSSAP and PA Pre-K Counts. CCDF funds are layered to support EHS-CC Partnership programs.

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations
The primary goals of combining funds are to maximize services to families and children and to support the provision of high-quality services, specifically through integrating the goals of early learning and family work supports. Combining funding allows dollars to be shifted to support demand in one or more of the subsidized child care components - TANF, former TANF and low income - and affords more fluidity of funds to minimize the time a family spends on the waiting list. Combining funding also serves the purpose of maximizing services for children participating in HS, EHS, and the PA Pre-K Counts program.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?
The method of funding allocation consists of incorporating the various funding streams into a master budget/coding sheet for OCDEL. The allocations are derived from two primary sources: the DHS budget and the U.S. Department of Health and Human Services, Administration for Children and Families (CCDF appropriation). This master coding sheet is used to load allocation information into the technology systems that supports Pennsylvania's CCDF program, Pennsylvania's Enterprise to Link Information about Children across Networks (PELICAN). Pennsylvania also allocates state funding to support PA Pre-K Counts and HSSAP slots.
e) How are the funds tracked and method of oversight

Funds are tracked with the aid of PELICAN-CCW's automated accounting system for subgrantees and provider payments. PELICAN-CCW allocates expenditures to appropriate funding sources based on the pre-loaded information for each subgrantee. Pennsylvania also uses the Systems, Applications, and Products (SAP) system to manage all state finances. SAP is an Enterprise Resource Management solution which allows for a multi-step process of checks and balances among all the state's departments involved in payment processing, contract and grant management, and fund accounting.

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

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

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

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

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

-- If checked, identify the source of funds:
General revenue funds - Child Care Assistance and Child Care Services

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: $302,367,000

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

-- If checked, are those funds:
- donated directly to the State?
- donated to a separate entity(ies) designated to receive private donated funds?

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

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

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

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

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

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

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

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

☐ No
☐ Yes

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

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

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

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

1.6 Public-Private Partnerships

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

1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).
Other State Agencies and County and Local Authorities. As outlined at Section 1.4, OCDEL coordinates a significant portion of its work with other state agencies, and county and local authorities. In furtherance of this, OCDEL initiated collaborations with the Department of Community and Economic Development (DCED, state level) with the goal of understanding and leveraging the opportunity local development investments offer high-quality early learning, the Department of Labor & Industry (L&I, state level) to implement an ECE Career Pathways System that supports apprenticeships and multiple career development paths for professionals with the goal of ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials, and the Department of Environmental Protection (DEP, state level) to increase compliance with the Pennsylvania Safe Water Drinking Act with the goal of ensuring that children have access to safe environments. OCDEL partners with the Pennsylvania Department of Health (DOH, state level) to implement the initiative Choose Safe Places for Early Care and Education with the goal of ensuring that children have access to safe environments. OCDEL also works closely with the leadership of the City of Philadelphia’s Office of the Mayor (local) and the City of Pittsburgh’s Office of the Mayor (local). Both Philadelphia and Pittsburgh recently made concerted investments and implemented programs at the local level to build the capacity of high-quality early learning. OCDEL partners with the regional leadership in these cities with the goals of aligning, supporting and enhancing the development of those local efforts, smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children. State, Regional and Local Level Organizations: OCDEL partners with various organizations at regional and local levels and with representatives from the non-profit and private sectors including the following. In addition to the coordination listed below, OCDEL employs a Director of External Relations who is charged with overall stakeholder engagement and coordination between the stakeholder groups described below. The Director of External Relations meets regularly with members of the groups described below and is available to all OCDEL stakeholders with the goal of developing strong relationships and coordination. Early Learning Council (ELC, state wide): Created with the issuance of the Governor’s Executive Order 2008-07, the primary purpose of ELC is to plan for the expansion of effective early learning and development services for young children and their families, and to make recommendations to ensure the plans are implemented successfully. ELC is also responsible for coordinating the delivery of federal and commonwealth programs designed to serve young children from pre-natal through their entry into school through third grade and to ensure a smooth transition for those children. ELC is
composed of representatives from a cross-sector of disciplines. Early Learning Investment Commission (ELIC, state wide): Founded in 2007, ELIC provides an ongoing forum to educate and engage business leaders as knowledgeable, effective advocates and to improve public sector investment in quality early learning. ELIC is a governor-appointed, business leadership commission that advocates and educates elected officials on the need for sustained investments in early learning. OCDEL partners with ELIC to host events, create reports, and conduct research and analysis that supports ELIC’s goals of increasing awareness of the connection between quality early childhood investment (that is, social, intellectual, physical, and emotional development) and a strong Pennsylvania economy; building a public-private partnership of leaders from all sectors at the state, regional, and local levels to advocate for quality early learning investment; expand access to high quality early learning opportunities in local communities for at risk children. The Pennsylvania Child Care Association (PACCA, state wide): Statewide, non-profit child care and early learning membership organization. PACCA coordinates with OCDEL around issues related to educational and financial resources available to child care providers, necessary supports for child care certification compliance, and opportunities to increase quality-building across early learning programs with the goals smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children. PACCA implements the T.E.A.C.H. scholarship program supported by state and federal funds administered by OCDEL with the goal of ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials. Pennsylvania Association for the Education of Young Children (PennAEYC, state wide): Statewide, non-profit child care professional membership organization. PennAEYC and OCDEL partner to develop and scale opportunities to support leadership development and shared services for Pennsylvania’s early childhood professional community with the goals of ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials. Pennsylvania Partnerships for Children (PPC, state wide): Statewide, non-profit advocacy organization. OCDEL partners with PPC to provide data that supports original research and white papers that make the case for greater investments and policy shifts across all early learning programs with the goals of smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children. Pennsylvania Head Start Association (PHSA, state wide): Statewide, non-profit HS program membership organization. OCDEL partners with PHSA to develop policies and
strategies for the integration and support of HS in the high-quality early learning community with the goals of extending the day and year of services for families; smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children. Early Learning Pennsylvania (ELPA, state wide): A broad-based coalition that advocates access to voluntary, high-quality early learning opportunities for all Pennsylvania children. ELPA’s public policy agenda focuses on four key components of early learning opportunities: pre-kindergarten, child care, home visitation, and EI. This partnership provides opportunities for greater investment at the local, state, and federal levels in high-quality early childhood programs and services. OCDEL collaborates with ELPA by providing data around the reach of OCDEL programs and unmet need for services across the state and within specific regions, conducting research and analysis, creating reports, and hosting events with the goals of extending the day and year of services for families; smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children, ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials. The Fred Rogers Center (state wide): Established in 2003 to carry forward Fred Rogers’ important legacy, the Center is the official home of the Fred Rogers Archive as well as a straightforward, understanding, and compassionate voice for the healthy social and emotional development of children birth to age 8. OCDEL coordinates with the Fred Rogers Center to support the broad implementation of Simple Interactions, a positive interactions model that supports the healthy development of supportive relationships between children and adults in early learning environments with the goal of nsuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials. Berks County Intermediate Unit (state wide): Implements the PA Key, which provides maintenance of fidelity for programs such as the Early Childhood Mental Health Consultation project, EHS-Child Care Partnerships, and the Head Start State Collaboration Office (HSSCO). The PA Key also manages the Pennsylvania Early Childhood Workforce Registry, the Quality Assurance Assessment Team, and the Pennsylvania ECE Career Pathways model. OCDEL coordinates with the PA Key with the goals of extending the day and year of services for families; smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children, ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials.
Tuscarora Intermediate Unit: Implements the Early Intervention Technical Assistance (EITA) program, which provide technical assistance to EI specialists and early childhood professionals with the goal of increasing inclusion, and reducing suspension and expulsion. Through a grant funded by the Heinz Endowment, EITA has selected three entities to pilot shared services models. The entities, strategically selected to reflect a variety of communities in Pennsylvania, are charged with developing shared services models that identify practices to support and incent providers to participate, especially small providers who can collectively utilize the model as a way to close staffing and other administrative gaps in their programs. EITA also holds the Grable Foundation and Heinz Endowment grants that support the Pennsylvania Early Learning Policy Fellowship, a cohort-based fellowship focused on increasing leadership skills and knowledge of the early learning landscape for mid-career professionals in a variety of disciplines. OCDEL coordinates with the Tuscarora Intermediate Unit with the goals of extending the day and year of services for families; smoothing transitions for children between programs and as they age into public school, linking comprehensive services to children in child care and developing the supply of quality care for vulnerable children, ensuring that all children have access to programs with highly qualified staff and that staff have access to career pathways and credentials.

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

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

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

- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;

- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;

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

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

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

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

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

☑ Yes. The state/territory funds a CCR&R system. If yes, describe the following:
   a) What services are provided through the CCR&R organization?
   OCDEL contracts with ELRCs to administer enhanced resource and referral services and defines service provision through a policy handbook. Examples of services include, responding to a family's need for information on how to locate and choose child care, maintaining consumer education materials, educating families on the importance of choosing a quality ECE program, informing of and referring clients to
other DHS and PDE programs including PA Pre-K Counts, EI, HS, EHS-CCP, WIC, CHIP, and evidenced-based home visiting. Based on education, experience, and training, staff have an understanding of child development, quality child care characteristics, types of care, and how ECE programs works together to support families and children. Examples also include encouraging clients to become familiar with the requirements of a regulated child care program and encouraging clients to visit regulated child care programs, observe child care activities, and use of steps and checklists before choosing a setting for their child(ren); collecting data and providing information on the supply of and demand for child care services in local areas, or regions of the state, and submitting such information to the state; ensuring staff is knowledgeable of local community and state services that may benefit families served; understanding the importance of cross-referring families to programs to support the blending and braiding of funding streams; and maintaining information on how to file a complaint online or with OCDEL's Regional Child Care Certification Office regarding a certified child care provider. The staff understand the process of directing clients to contact the regional office if they have a complaint about or regarding a program's violation of the regulations or if the client would like to request a complaint history for a particular provider. Clients can view complaints at www.findchildcare.pa.gov.

Provision of resource and referral services also includes referring clients to COMPASS, a web-based resource and referral site, to gather information about other benefits for which they may apply, such as TANF, SNAP, LIHEAP, CHIP, WIC, etc. The ELRC also supplies clients with information on how to obtain copies of relevant DHS regulations for child care providers, upon request. These include regulations at 55 Pa. Code:

Chapter 3041 - Subsidized Child Day Care Eligibility at [http://www.pacode.com/secure/data/055/chapter3041/chap3041toc.html](http://www.pacode.com/secure/data/055/chapter3041/chap3041toc.html)  
Chapter 3270 - Child Day Care Centers at [http://www.pacode.com/secure/data/055/chapter3270/chap3270toc.html](http://www.pacode.com/secure/data/055/chapter3270/chap3270toc.html)  
Chapter 3290 - Family Child Day Care Homes at [http://www.pacode.com/secure/data/055/chapter3290/chap3290toc.html](http://www.pacode.com/secure/data/055/chapter3290/chap3290toc.html)  
Provision of resource and referral services also includes: Maintaining information on how to file a suspected child abuse complaint through ChildLine, the statewide Child Abuse
ELRC coordinates services with other state programs in the child care system, such as OCDEL Regional Child Care Certification Offices, County Assistance Offices (CAO), EARN Centers, and Employment and Training Offices. It also works with local groups that are concerned with improving the quality and capacity of child care services.

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

The state contracts to support 19 ELRCs operating statewide. The ELRCs are able to assist parents with finding child care through an online provider search system located on the COMPASS website. The COMPASS website is a hub of information regarding the DHS’ social service programs and benefits. A family can complete a few questions to screen for potential eligibility for social service benefits, including child care. A family can also complete and submit an online application for subsidized child care and other benefits, and track the progress of the pending application.

1.8 Disaster Preparedness and Response Plan

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

The Statewide Child Care Disaster Plan was created in the FFY 2015-2018 plan cycle. Annual or as needed reviews of the plan occur with the required parties. On 1/24/2018, DHS Disaster Human Services, PEMA, DOH, and OCDEL Child Care Certification Staff met to review the existing plan. No specific changes were identified to the plan document itself. The group discussed opportunities to participate in preparedness training as well as how to continue to enhance communications across the agencies. Staff from Disaster Human Services serves as the cross office, cross-department liaison on all issues related to emergency preparedness and disaster recovery. In addition to formal meetings and events, OCDEL staff are able to access Disaster Human Services supports for planning and coordination as needed. The current plan location was shared with the ELC on 3/29/2018. Members, which include representatives of local and state child care resource and referral agencies, had opportunity to review and provide feedback. Periodic review and updates are scheduled to update the plan with new information as needed. When the plan is updated, the effective date is noted in the plan along with a summary of changes. The revised plan is posted to the DHS website. The implementation of the ELRC will necessitate an update of the plan to reflect the role those community-based entities will have to support child care providers and enable families to continue to access child care in the event of an emergency or disaster.

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

During an emergency or disaster, child care providers will implement their locally designed emergency plans which address as appropriate evacuation, relocation, shelter-in-place, or lockdown. In the event the local community emergency management team requests support
from the Governor, Pennsylvania is poised to open mass care shelters within 6 hours of the request. Emergency shelters have materials and equipment to support all ages of children, including infants and toddlers; children with disabilities and special health care needs. As part of the responsibilities of ESF #6-Mass Care, Emergency Assistance, Housing and Human Services, Disaster Human Services implements Family Reunification. OCDEL operates in partnership with regional organizations to support the management of the CCW program. CCW is Pennsylvania’s child care subsidy program for eligible families supported by CCDBG funding. ELRCs must each have a continuity plan in place to address locally determined risks. Each ELRC emergency preparedness plan addresses; local risk assessment, staff training, and emergency response procedures. ELRC must also have a process for backup and storage of electronic files to mitigate loss in the event of an emergency. The goal of ELRC emergency plans is to continue to operate in support of families and providers, issue continued payments and maintain program records. The OCDEL Statewide Child Care Emergency Plan outlines the support provided by OCDEL to local child care providers in the event of an emergency where the providers must relocate and open in a new location. The Statewide Child Care Emergency Plan is supplemented with staff guidance OCDEL Announcement C-17 #05 which provides child care certification staff with further direction to support child care provider’s temporary relocation.

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

In the event of a disaster, as the community moves in the to the recovery phase, the OCDEL Child Care Certification Staff will assess the impacts on the community impacted. OCDEL Certification staff will use phone, email, or as necessary, visits to understand the impacts to providers and to understand what if any supports they may need to continue operations. Certification staff can support providers through temporary relocation. Depending on the circumstance, OCDEL has the authority to waive regulations for providers to exceed capacity and other child care regulations. In addition to the support offered by child care certification staff, the ELRC agencies can support providers impacted by emergency or disaster by providing TA and coaching supports. ELRCs are also responsible for local implementation of CCW and have procedures to follow to address continuity of services to families. These supports are outlined in the current Statewide Child Care Emergency Plan.
1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place: evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:

The requirements to address evacuation, relocation, shelter-in-place, lockdown, communications with and reunification of families, continuity of operations, and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions are addressed in Pennsylvania Child Care Regulations. The following steps are implemented to assure all providers fulfill the requirements: All new child care providers must complete pre-service health and safety training which includes emergency preparedness. This is monitored by child care certification staff in the review of application materials. All child care providers must have an emergency plan in place that addresses the topics prior to opening for operations. This is monitored by child care certification staff prior to opening and annually during inspections. All new staff must be trained on the facility-specific training within a week of hire. Additionally, all new staff must complete the health and safety training within 90 days of hire. This is monitored by child care certification staff annually during inspections. Existing staff receive training regarding the emergency plan on an annual basis and at the time of each plan update. The date of each training and the name of the facility person who received the training shall be documented in writing and kept on file at the facility.

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

- Documentation of staff and volunteer training and practice drills is monitored by child care certification staff annually during inspections.
1.8.6 Provide the link to the website where the statewide child care disaster plan is available:

http://www.dhs.pa.gov/provider/earlylearning/

2 Promote Family Engagement through Outreach and Consumer Education

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

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

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

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

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

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

Other.

Describe:

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

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)

Caseworkers with specialized training/experience in working with individuals with disabilities

Ensuring accessibility of environments and activities for all children

Partnerships with state and local programs and associations focused on disability-related topics and issues

Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers

Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies

Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children

Other.

Describe:

2.2 Parental Complaint Process

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

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

All substantiated complaints and inspections of child care centers, group and family child care homes are maintained online on the COMPASS website at https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch. The website contains a link through which the public may report complaints. In the alternative, the public may contact the regional offices to report complaints. All regional offices maintain a
toll-free number. Contact information for the regional offices is available online at http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_183843.pdf. In addition, the public may submit complaints by navigating through the “Contact Us” link on the website at http://www.dhs.pa.gov/provider/earlylearning/childcareregulations/index.htm. Substantiated parental complaints have been maintained electronically since 2008.

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

All complaints of regulatory non-compliance are reviewed by supervisors at the OCDEL Bureau of Certification Services, then assigned to a Certification Representative for inspection. The findings are shared with the complainant. Also, all records of substantiated complaints and inspections of child care centers, group and family child care homes are maintained in the Compass website located at https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch.

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

All complaints of regulatory non-compliance are reviewed by Bureau of Certification Services supervisors and then assigned to a Certification Representative for inspection. The findings are shared with the complainant. All records of substantiated complaints and inspections of child care centers, group and family child care homes are maintained in the COMPASS website located at https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch.
2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:

All substantiated parental complaints are maintained publically online on the PA COMPASS website at

https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch

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

Access to complaint information to the public is available on the COMPASS website at

https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch

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

Article IX and X of the Pennsylvania Human Services Code

2.3 Consumer Education Website

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, the quality of each provider (if such information is available for the provider),

Pennsylvania
and the availability of the provider (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

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

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

Pennsylvania’s provider search website, [www.findchildcare.pa.gov](http://www.findchildcare.pa.gov), allows consumers to search for early learning providers in multiple ways including provider name, distance from a specific address, by county, and by municipality. Consumers can also filter using a variety of criteria such as STARS rating, hours of operations, provider type, and languages spoken/taught. The website provides tool tips that offer additional information and explanation, as needed, as well as frequently asked questions. There is the ability for the consumer to create both summary and detailed reports, in PDF or EXCEL, that include providers that meet specific criteria. Information about the provider’s licensing history is written in clear, understandable language. The website is available in both English and Spanish, is ADA compliant and mobile friendly.

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

The provider search website is part of the COMPASS website which is available in Spanish and has an instructional tagline in a variety of different languages, including Vietnamese, Russian, and Cambodian.
2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:

The provider search website is compliant with requirements of the ADA. The online application offers TTY/TTD numbers that are toll-free for persons that are hearing impaired. The online application is mobile-friendly.

2.3.4 Lead Agency processes related to child care.

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

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:
http://www.dhs.pa.gov/provider/earlylearning/earlylearningproviderrequirements/

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:
http://www.dhs.pa.gov/provider/earlylearning/index.htm#.VydY4XrPXug

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

### 2.3.5 List of providers

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

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

www.findchildcare.pa.gov

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

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

Describe Head Start, EHS, PA PreK Counts, state or federally funded home visiting programs, and private academic schools licensed by PDE.

c) Identify what informational elements, if any, are available in the searchable results. Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

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

Describe:
Hours of operation, languages served, schedule, directions to facility, school districts served, ages served, fee schedule, discounts, financial programs accepted, meal options, accreditations, special accommodations, transportation.

License-Exempt, non-CCDF Providers

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

Describe:

License-Exempt CCDF Center Based Providers

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

License-Exempt CCDF Family Child Care
☐ Contact Information
☐ Enrollment Capacity
☐ Years in Operation
☐ Provider Education and Training
☐ Languages Spoken
☐ Quality Information
☐ Monitoring Reports
☐ Other.
Describe:

Relative CCDF Providers
☐ Contact Information
☐ Enrollment Capacity
☐ Years in Operation
☐ Provider Education and Training
☐ Languages Spoken
☐ Quality Information
☐ Monitoring Reports
☐ Other.
Describe:

Other.
Describe:
Head Start, EHS, PA PreK Counts, state or federally funded home visiting programs, and private academic schools licensed by PDE.
2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.

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

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

b) For what types of providers are quality ratings or other indicators of quality available?
Licensed CCDF providers.
Describe the quality information:
Keystone STARS, national accreditations, meeting HS, EHS, or PA Pre-K Counts requirements.

Licensed non-CCDF providers.
Describe the quality information:
Keystone STARS, national accreditations, meeting HS, EHS, or PA Pre-K Counts requirements.

License-exempt center-based CCDF providers.
Describe the quality information:
Keystone STARS, national accreditations, meeting HS, EHS, or PA Pre-K Counts requirements.

License-exempt FCC CCDF providers.
Describe the quality information:

License-exempt non-CCDF providers.
Describe the quality information:
Keystone STARS, national accreditations, meeting HS, EHS, or PA Pre-K Counts requirements.

Relative child care providers.
Describe the quality information:

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

Certify by responding to the questions below:

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

Plain language is designed to ensure the reader understands as quickly, easily and completely as possible. Plain Language strives to be easy to read, understand, and use. Public feedback is provided via the following link: http://www.dhs.pa.gov/Feedback/index.htm?ContactCode=OCDEL&Subject=Child

b) Are monitoring and inspection reports in plain language?

☑ If yes,
include a website link to a sample monitoring report.

All monitoring and inspection reports are full reports and not summaries that are written in plain-language indicating the results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with the Department's regulations. The reports also document the correction required and the provider's plan to correct any violations. See www.findchildcare.pa.gov.

☐ If no,
describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

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

☐ Date of inspection

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

Describe how these health and safety violations are prominently displayed.
Violations are noted under inspection details and are highlighted in blue.

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

Describe
The provider's plan of correction is provided. If the state sanctions the program, it is indicated as such and color coded to signify the issuance of a provisional certificate of compliance.

d) The process for correcting inaccuracies in reports.
Any inaccuracies discovered in monitoring and inspection reports may be amended on the Certification and Licensing System (CLS). CLS is an internal web-based system that child care certification staff use to manage the certification process, reporting and to maintain history. CLS is linked to the COMPASS website in order to publicly display inspection results. The reports are immediately available at https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.
DHS notifies providers in writing of any sanction, and within the notice, there is information provided on appeal rights. Providers must provide written notice of appeal within 30 days from the date of the DHS determination.

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

Upon the completion of monitoring and inspection reports, all reports are posted to CLS. During an overnight batch, the reports are extracted from CLS into the COMPASS website at

https://www.compass.state.pa.us/Compass.Web/ProviderSearch/Home#/BasicSearch

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

Monitoring and inspection reports are routinely purged from CLS after five years have elapsed from the date all such reports were initially generated.

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

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

Describe

All regulated child care providers are subject to monitoring, inspections, and the resulting reports.

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

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

Child care providers must report any inpatient hospitalization, emergency room treatment, or the death of a child receiving care to the OCDEL regional certification office. The regional certification offices submit this information on a monthly basis to headquarters for compilation into the aggregate report.

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

In Pennsylvania, "substantiated child abuse" is referred to as an "Indicated Report" of abuse which is defined in the DHS regulations at 55 Pa. Code 3490.4 as a child abuse report made under the Child Protective Services Law (CPSL) and this chapter if an investigation by the county agency or DHS determines that substantial evidence of the alleged abuse exists based on any of the following: Available medical evidence; The child protective service investigation; or An admission of the acts of abuse by the perpetrator.

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

Any occurrence, during the time a child receives care at a child care facility that results in such child being taken to the hospital or an emergency treatment facility.

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

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


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


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


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

N/A
2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

ELRCs provide resource and referral information to educate parents on how to choose child care and how to identify quality child care. ELRCs conduct a face-to-face meeting with the parent and provide written information to help promote informed choices. ELRC resource and referral services are available to all parents, including those that do not receive CCDF assistance. ELRCs give parents who request help with finding a provider, provider lists based on the parent's stated needs. Parents can also conduct online provider searches at: www.findchildcare.pa.gov. Pennsylvania’s consumer website offers information on financial assistance, Keystone STARS, PA Pre-K Counts, HS, and EHS.
2.4.2 The partnerships formed to make information about the availability of child care services available to families.

OCDEL merged the commonwealth’s previously separate system of Child Care Information Service agencies and the Regional Keys. This effort created local ELRCs to provide parents and providers with one agency that supports child care and early learning services. The ELRC’s responsibility is to promote and support quality in child care and early learning. The ELRCs are tasked with making sure parents and caretakers know and understand what to look for in quality child care through resource and referral. The ELRCs designate child care at the appropriate STAR level through Keystone STARS. The ELRCs also work closely with child care licensing staff to promote quality in child care.

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

- **Temporary Assistance for Needy Families program:**
  Parents may use the DHS public portal, COMPASS, to apply for benefits. ELRCs also provide information on how to apply for benefits and on community resources where parents can find more information. ELRCs post community resources and services in office waiting rooms making the information readily available to the public.

- **Head Start and Early Head Start programs:**
  ELRCs provide information on how to apply for HS and EHS directly to potentially eligible families and also provide information about local enrollment opportunities for their children. The provider search portal provides parents with the ability to search for HS and EHS programs located in their area. The paper application for the subsidized child care program includes a checklist that asks the parent if they want more information on certain topics, one of which is HS and EHS.
Low Income Home Energy Assistance Program (LIHEAP):
Parents may use COMPASS to apply for benefits. ELRCs also provide information on how to apply for benefits and on community resources where parents can find more information. ELRCs also post community resources and services in office waiting rooms making the information readily available to the public. The paper application for the subsidized child care program includes a checklist that asks the parent if they want more information on certain topics, one of which is LIHEAP.

Supplemental Nutrition Assistance Programs (SNAP) Program:
Parents may use the COMPASS to apply for SNAP benefits. ELRCs also provide information on how to apply for benefits and on community resources where parents can find more information. ELRCs also post community resources and services in office waiting rooms making the information readily available to the public. The paper application for the subsidized child care program includes a checklist that asks the parent if she wants more information on certain topics, one of which is SNAP.

Women, Infants, and Children Program (WIC) program:
ELRCs provide information on how to apply for benefits and on community resources where parents can find more information. ELRCs also post community resources and services in office waiting rooms making the information readily available to the public. The paper application for the subsidized child care program includes a checklist that asks the parent if she wants more information on certain topics, one of which is WIC.

Child and Adult Care Food Program (CACFP):
Parents may use COMPASS to apply for benefits. ELRCs also provide information on how to apply for benefits and on community resources where parents can find more information. ELRCs also post community resources and services in office waiting rooms making the information readily available to the public. The paper application for the subsidized child care program includes a checklist that asks the parent if she wants more information on certain topics, one of which is free and reduced school meals.
Medicaid and Children's Health Insurance Program (CHIP):
Parents may use COMPASS to apply for benefits. ELRCs also provides information on how to apply for benefits, including the potential to receive Medical Assistance under Pennsylvania’s expanded Medicaid programs, and on community resources where parents can find more information. The ELRC also post community resources and services in office waiting rooms making the information readily available to the public. The paper application for the subsidized child care program includes a checklist that asks the parent if she wants more information on certain topics, one of which is CHIP.

Programs carried out under IDEA Part B, Section 619 and Part C:
EI supports and services are designed to meet the developmental needs of children with a disability as well as the needs of the family related to enhancing the child’s development in one or more of the areas of physical development, including vision and hearing, cognitive development, communication development, social and emotional development, and adaptive development. Parents who have questions about their child’s development may contact the DHS CONNECT Helpline. The CONNECT Helpline assists families in locating resources and providing information regarding child development for children ages birth to five. In addition, CONNECT assists parents by making a direct link to their county EI program or local preschool EI program. Under Pennsylvania’s Race to the Top-Early Learning Challenge grant, the family and consumer education provided through CONNECT was expanded to a web presence and will also expand to meet the requirements of the CCDBG. Families may also use COMPASS to link to EI services and be prompted to apply for health care benefits as appropriate. All local EI programs are required to engage in community outreach and child find initiatives to ensure that parents of infants, toddlers, and preschool children have access to EI services. Local school districts are responsible for ensuring special education services for children, kindergarten through age 21. All school districts engage in child find initiatives to ensure that families have access to EI services.
2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children’s development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.

OCDEL and the PA Key develop and continually update materials on the stages of child development, transition, best practices, and activities to engage with children’s healthy development that are promoted and available to parents, providers, and the public. These materials are made available through multiple sources, as listed below. Parents may also use the Early Learning GPS at [www.earlylearninggps.com](http://www.earlylearninggps.com) to learn more about what impacts a child’s development. OCDEL provides publications, materials, and comprehensive information on public websites: DHS at [www.dhs.pa.gov](http://www.dhs.pa.gov), PDE at [www.education.pa.gov](http://www.education.pa.gov), and EITA at [http://www.eita-pa.org/](http://www.eita-pa.org/). Parents may call the CONNECT Hotline offered by EITA to find resources and have questions answered about a child’s development. Direct communication through the ELRC agencies and child care certification staff facilitates sharing of materials to parents, caregivers, and the public. Pennsylvania’s Promise for Children website at [http://papromiseforchildren.com](http://papromiseforchildren.com) is another resource. Providers are able to access professional development information on children’s development, including physical health and development, and healthy eating and physical activity on the PA Professional Development Registry [https://papdregistry.org](https://papdregistry.org). The Pennsylvania Core Knowledge Competencies for Early Childhood and School-Age Professionals is an essential component of Pennsylvania’s PD system. It identifies a set of content areas that help define the knowledge expectations for professionals in settings within the early childhood and school-age field. It supports students’ preparation for entry into the field of early childhood and school-age care as well as professionals’ commitment to lifelong learning through ongoing professional growth. Training and professional development aligned to Knowledge Areas 1 and 2 are defined as: Knowledge Area 1 – Child Growth and Development: Professionals must understand the inter-dependence of each key area of learning and how to provide meaningful and relevant experiences for children that are developmentally appropriate, individualized to accommodate each child’s needs and interests, and be respectful of the families’ diverse values and cultures. Knowledge Area 2 – Curriculum and
Learning Experiences: Early childhood and school-age professionals must utilize their knowledge of child development and each child’s individual needs and interests to design learning spaces and age, cultural and linguistically appropriate experiences that guide and facilitate children’s physical, social and emotional, and cognitive learning. Additionally, providers may access Child Care Health Consultants (CCHC) and Infant Toddler Specialists’ for targeted technical assistance on child care health practices, developmentally appropriate practices for infants and toddlers, and other areas of need specific to physical health and development.

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

Pennsylvania’s ECMH consultation program is a child-specific consultative model which addresses the social-emotional development of young children within their early care and education (ECE) program. Services are provided at the request of the program and with the permission of the child’s parent or guardian. The ECMH program includes an array of customized services that are based on the Pyramid Model for Promoting the Social Emotional Competence of Young Children (Center on the Social-Emotional Foundations for Early Learning). ECMH consultation is designed to assist early care and education programs in meeting the social and emotional needs of children who exhibit challenging behaviors in the classroom. The project goals are: Reduce the number of children expelled from early care and education settings due to behavioral issues Increase understanding of social and emotional development and its impact on educational success Link and bridge systems and services on behalf of a child, family and program. Information is available at the Pa Key’s website at https://www.pakeys.org/pages/get.aspx?page=Programs_ECMH OCDEL partners with the PA Key, regional contractors, EITA, and behavioral health to support these efforts. Pennsylvania Positive Behavior Support Network (PAPBS) support the Program Wide Positive Behavior Intervention Supports (PW-PBIS) and School-wide Positive Behavior
Intervention Supports (SW-PBIS) sites through ongoing training, coaching, data support, and guidance from PBIS regional facilitators. Information and resources are shared via the website, www.papbs.org, and are targeted toward schools and early learning programs seeking to implement PBIS. Although PAPBS was originally formed to support school-wide implementation of PBIS the principles and structure are appropriate to also support program-wide implementation of PBIS in early childhood settings. The PAPBS state leadership team has added members from the OCDEL, EITA and the Pennsylvania Key to Quality (PA Keys). The leadership team and appropriate subcommittees continue to recruit, train and support school-wide and program-wide network facilitators and external/internal coaches. The guidance and support provided to early childhood programs is based on resources and consultation from the Center for Social Emotional Foundations for Early Learning (CSEFEL) and the Technical Assistance Center for Social and Emotional Intervention (TACSEI). Programs access ECMH and PW-PBIS information through the ELRCs, PA Key, or at http://www.pakeys.org/getting-started/ocdel-programs/early-childhood-mental-health-ecmh/. When early learning programs implement program wide PBIS, families are engaged in a variety of ways, including the following: Family member representation on the Core Leadership Team Information about PW-PBIS efforts in the early learning program and how it impacts children in positive ways Information about ways families can use PBIS in their homes and in the community.

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

On 6/29/2017, OCDEL released a policy announcement entitled "Reduction of Expulsion and Suspension in Early Childhood Programs in Pennsylvania." This announcement informed all early learning programs in Pennsylvania of the need to develop program specific policies to prevent, and support the reduction of suspension and expulsion of young children from their programs. Additionally, programs were informed that the policy must uniformly applicable to all children in their programs, and it must be shared with each family at their facility. The announcement was initially released via external partners and emailed through listservs. OCDEL monitors the existence of such policies through its child care regulations. The
regulations require providers to review with the parents, at the time of application, the program’s dismissal policies. Providers wishing to participate in the subsidized child care program must sign an agreement which requires providers to establish and share with parents a written policy on expulsion and suspension. It also requires that the policy contain a protocol which the provider will follow when an at-risk child is identified. Programs participating in the PA Pre-K Counts Program or HSSAP will be asked to provide a copy of their dismissal policy during annual program monitoring. If the program does not have a policy at the time of annual review, technical assistance will be provided to help them develop and implement one. Keystone STARS also requires programs to have a dismissal policy in order to achieve a STAR 2 rating. OCDEL developed and released guidance documents to help programs develop their own policies, and linking them to best practices resources. The document also provides programs with information about Pennsylvania’s CONNECT hotline. Through this hotline, program providers are connected to resources to help address children who are exhibiting challenging or unique behaviors. To further expound the guidance documents, OCDEL released a webinar on the topic of developing suspension and expulsion policies. OCDEL released a survey regarding the utility of these tools, and is currently using the results to inform how the state can further support programs in developing their own program policies to reduce suspension and expulsion. All guidance released by OCDEL is disseminated through external partners and email listservs. The policy announcement, guidance documents, webinar, and survey results are available for public consumption on the PA Key website at www.pakeys.org.

2.5 Procedures for Providing Information on Developmental Screenings

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

2.5.1 Certify by describing:

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

OCDEL works collaboratively with DOH to insure children in child care and other early learning settings receive periodic screenings and immunizations as recommended by the American Academy of Pediatrics. This is achieved through periodic monitoring and on-site visits by DOH nurses at child care facilities to review immunization records. Parents may call the CONNECT Hotline offered by EITA to find resources and have questions answered about a child's development and be connected to screening and EI information. Through evidence-based home visiting programs, OCDEL provides information and support to young parents, including information about the importance of early screening and immunization as part of a child's healthy development. The American Academy of Pediatrics' Bright Futures guidelines inform this work. Developmental screenings, within 45 days of a child's program enrollment, is a required STAR 2 indicator in the Keystone STARS performance standards. Programs must utilize a research-based developmental screening tool and then continue to follow the tools' required periodicity. Programs must communicate the results of any developmental screening to families and refer children for additional screening as appropriate. Additionally, all STAR 2, 3, and 4 programs must offer families a minimum of one conference per year to discuss their child(ren)'s progress and behavioral, social, and physical needs.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). ELRCs discuss children's health and development with the parent during a face-to-face
interview. Referral information is provided upon request.

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

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays. ELRCs provide referral information to parents at the face-to-face meeting.

e) How child care providers receive this information through training and professional development. PD is provided to practitioners on the use of research based screening tools as well as information around how to determine if follow-up support services are needed. Information on connecting with ECMH to support children at risk of program suspension or expulsion due to challenging behaviors is also regularly disseminated through the PA Key and the ELRCs. Early care and education providers are encouraged to work closely with local EI programs to ensure families are able to access services and support children receiving services in their care setting.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings. 55 Pa. Code Chapters 3270, 3280, and 3290 require age-appropriate health assessments be conducted and be on record no later than 60 days following enrollment. (See § 3270.131 (relating to health assessment), § 3280.131 (relating to health assessment), and § 3290.131 (relating to health assessment). Keystone STARS performance standards EC.2.3 (required developmental screening within 45 days of program enrollment).
2.6 Consumer Statement for Parents Receiving CCDF Funds

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

2.6.1 Certify by describing:

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

Parents are provided with a written copy of the "A Parent's Handbook to Subsidized Child Care". Information on provider compliance is available on the provider search website at www.findchildcare.pa.gov. The subsidized child care application provides the COMPASS website address, which contains the link to the provider search site.

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

The handbook can be mailed or provided to families at the face-to-face meeting with the ELRC. It includes information about the program, how to find providers, information on quality care, and reporting requirements. The handbook also provides instruction and contact information on who to call if the parent has a child care concern. Parents are provided with the provider search website where they can find certification and complaint history about providers. The provider search website can be found at www.findchildcare.pa.gov.
c) Provide a link to a sample consumer statement or a description if a link is not available.

The provider search website gives parents information about each regulated provider including the current status of the provider's license, the status history of the provider's license, inspection dates and results, and complaint dates and results. The provider search website can be found at www.findchildcare.pa.gov. This site has a link for parents to register a complaint about a provider. It also has a link to explain how child care providers are regulated, healthy child development, and parenting tips.

3 Provide Stable Child Care Financial Assistance to Families

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

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

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

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

3.1.1 Eligibility criteria based on a child’s age

a) The CCDF program serves children

from one week

(weeks/months/years)

through 12

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

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

☐ No
☒ Yes,

and the upper age is through 18 years

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: A child who is incapable of caring for himself due to physical, mental, and/or developmental disabilities as determined by a licensed physician or psychologist.
c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))

☑ No.
☐ Yes

and the upper age is

(may not equal or exceed age 19)

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

"residing with":
For non-TANF families, a family includes the child(ren) for whom subsidized child care is requested and the following individuals who reside with the child(ren): The parent of the child(ren) (biological, adoptive or stepparent). A caretaker. The spouse of a parent or caretaker. The biological, adoptive, foster child or stepchild of the parent or caretaker who is under 18 years of age. An unrelated child who is under 18 years of age and is under the care and control of the parent or caretaker. A child who is 18 years of age or older but under 22 years of age and is enrolled in high school or a high school equivalency program, or a post-secondary program leading to a degree, diploma or certificate and who is wholly or partially dependent upon the income of the parent or caretaker or the spouse of the parent or caretaker. For TANF families, a family is defined as the "budget group" composed of all individuals who live together, as defined in accordance with the TANF eligibility regulations.

"in loco parentis":
For non-TANF families, a "caretaker" is defined as a person who has legal custody of the child, a foster parent, a grandparent, an aunt or uncle who lives with and exercises care and control of a child. For TANF families, this refers to a person who is not the parent of the child, but meets the requirements of a specified relative in accordance with the TANF eligibility regulations.
3.1.2 Eligibility criteria based on reason for care

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

"Working":
For non-TANF families, parents must work an average of 20 hours a week, or work at least 10 hours a week and attend a training program for at least 10 hours a week. Work is employment or self-employment. Employment is working for another individual or entity for income. Self-employment is operating one's own business, trade, or profession for profit. For TANF families, parents and caretakers are not required to be employed to receive child care. Parents and caretakers must participate in a training program or complete job search requirements. The TANF eligibility agent determines the employment and training requirements for families receiving TANF benefits.

"Job training":
For non-TANF families, training includes adult basic education, English as a second language, a 2-year or 4-year postsecondary degree program, an internship, clinical placement, apprenticeship, lab work, or field work required by the training institution. For TANF families, parents and caretakers must participate in a training program or complete job search requirements. The TANF eligibility agent determines the employment and training requirements for families receiving TANF benefits.

"Education":
Education is defined as "an elementary school, middle school, junior high, or high school program including a general educational development program." Teen parents are eligible if they attend a full-time education program.

"Attending job training or education" (e.g. number of hours, travel time):
Teen parents must be attending an education program full-time as certified by the education institution. All others must meet the work requirement of working 20 hours a week. Attending a training program may be used to substitute for up to 10 hours of work time. Travel time is included in the number of hours of care authorized, but not
as part of the 20-hour work requirement.

3.1.2 Eligibility criteria based on reason for care

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

☐ No.

If no, describe the additional work requirements:

☑ Yes.

If yes, describe the policy or procedure:
The work hour requirement is met when a parent under the age of 22 is attending high school or if a parent under the age of 18 who does not have a high school diploma or a GED is enrolled in and attending an education program full-time. Currently, parents who permanently lose employment between redetermination periods have 92 days to find employment. As of the submission date of this plan, Pennsylvania has amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state’s ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state’s regulations are finalized.

3.1.2 Eligibility criteria based on reason for care

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

☐ No.

☑ Yes.

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

As of the submission date of this plan, Pennsylvania has amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state’s ability to honor the full intent of the CCDBG re-authorization
and would permit a 92-day period of presumptive eligibility at intake and redetermination during which families experiencing homelessness could conduct a job search. A plan amendment will be submitted when the state's regulations are finalized.

3.1.2 Eligibility criteria based on reason for care

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

☐ No.

☑ Yes. If yes:

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

Foster children who are in the legal custody of a local children and youth agency may receive subsidized child care if the foster parent(s) meet the work requirements and there is a need for care. If a foster family meets the work requirements, the income of the foster parent is not included in the eligibility determination and the family pays the minimum co-payment of $5 per week.

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

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

☐ No

☑ Yes

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

☐ No

☑ Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in
3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.

a) How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?
For non-TANF families, income includes earned income including gross wages from work, cash and in-kind payments received by an individual in exchange for services, and income from self-employment; unearned income including cash and contributions received by an individual for which the individual does not provide a service; and unearned benefits received periodically by an individual, such as unemployment compensation, worker's compensation, or retirement benefits. For TANF families, income is the total (gross) countable monies available to a budget group on a monthly basis as defined by TANF eligibility requirements.

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

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>100% of SMI ($/Month)</td>
<td>85% of SMI ($/Month) [Multiply (a) by 0.85]</td>
<td>(IF APPLICABLE) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI</td>
<td>IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI</td>
</tr>
<tr>
<td>1</td>
<td>$3,742</td>
<td>$3,181</td>
<td>$2,023</td>
<td>54%</td>
</tr>
<tr>
<td>2</td>
<td>$4,894</td>
<td>$4,160</td>
<td>$2,743</td>
<td>56%</td>
</tr>
<tr>
<td>3</td>
<td>$6,045</td>
<td>$5,138</td>
<td>$3,463</td>
<td>57%</td>
</tr>
<tr>
<td>4</td>
<td>$7,197</td>
<td>$6,117</td>
<td>$4,183</td>
<td>58%</td>
</tr>
<tr>
<td></td>
<td>(a)</td>
<td>(b)</td>
<td>(c)</td>
<td>(d)</td>
</tr>
<tr>
<td>---</td>
<td>------</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>5</td>
<td>$8,348</td>
<td>$7,096</td>
<td>$4,903</td>
<td>59%</td>
</tr>
</tbody>
</table>

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

N/A

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


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

N/A

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 5/7/2018

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


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

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

On the application, the parent or caretaker checks "yes" or "no" to the question: Do you have assets over one million dollars? Parents and caretakers must sign an affidavit swearing that everything on the application is true.

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

☐ No.
☑ Yes.

If yes, describe the policy or procedure and provide citation:
A foster child is counted as a family of one. We do not count income and assets for a foster child. Chapter 3041.31(d) relating to family size.

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

As of the submission date of this plan, Pennsylvania had amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized. These regulations will permit families experiencing homelessness to be eligible for a 92-day presumptive eligibility period while they look for work.

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

☑ Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
☑ Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
☑ Establishing minimum eligibility periods greater than 12 months
☑ Using cross-enrollment or referrals to other public benefits
☐ Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in
collaboration with child care services

- Providing more intensive case management for families with children with multiple risk factors;
- Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- Other.
  Describe:

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

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

i. 85 percent of SMI for a family of the same size

ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:

(A) Takes into account the typical household budget of a low-income family
(B) Provides justification that the second eligibility threshold is:
  (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
  (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

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

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

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

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

Describe the policies and procedures.

Provide the citation for this policy or procedure.

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

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

A family enters the program with income that is 200 percent or less of the Federal Poverty Income Guidelines (FPIG). This amount is $40,840 for a family of three. The family may remain eligible until the annual income exceeds 235 percent of the FPIG. This amount is $47,987 for a family of three.

Describe how the second eligibility threshold:

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

Parents remain eligible for a full 12-month period unless the family’s annual income reaches 85 percent of the state median income. The upper income limits
permit parents to receive raises and income increases without losing eligibility. Pennsylvania analyzed reasons families leave the program and found that very few families (1 percent) leave the program because they are over the income limit.

ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
Income is stabilized during the 12-month eligibility period. The 235 percent FPIG limit is only imposed at redetermination. The difference between the two limits permits the family's annual income to increase approximately 17 percent before the family becomes ineligible for the program.

iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
Income is stabilized and families remain eligible until the 12-month eligibility period expires, even if the family's annual income exceeds 235 percent of the FPIG.

iv. Provide the citation for this policy or procedure:
55 Pa. Code Chapter 3041 Subsidized Child Care Eligibility. Graduated phase-out is addressed at § 3041.41(a), (b), and (c).

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

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

☑ No
☐ Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.
ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? *(Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.)*

- ☐ No.
- ☐ Yes.

Describe:

3.1.8 Fluctuation in earnings.

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

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

- ☐ Request earning statements that are most representative of the family's monthly income.
  
  Describe:

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

☐ Other.

Describe:

Families do not have to report a change in income between redetermination periods.
Families must report if the family's annual income increases to 85 percent of the state median income (SMI). The ELRC will work with the family to review income information when the family reports income in excess of 85 percent SMI to insure that it is not just a temporary increase over the limit.

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

- **Applicant identity.**
  
  Describe:
  
  Verification of identity is required one time only, at application. Acceptable verification of applicant identity includes a photo-ID or two non-photo-ID documents such as Social Security card, birth certificate, or voter registration card.

- **Applicant's relationship to the child.**
  
  Describe:
  
  Relationship to child is required one time only, at application or upon adding a new child to the case. Acceptable verification of the applicant's relationship to the child includes a birth certificate, custody order, medical or school records.

- **Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).**
  
  Describe:
  
  This verification is required one time at application or upon adding a new child to the case. Acceptable verification of the child's eligibility information includes a birth certificate, medical or school records.

- **Work.**
  
  Describe:
  
  This verification is required at application, redetermination, or any time a parent is
requesting an increase in the number of authorized child care hours based on changes in the number of work hours. Acceptable verification of work includes any document that indicates the employer's name, address, telephone number, and the number of hours worked, a work schedule, or OCDEL's employment verification form signed by the employer.

☑️ **Job training or educational program.**

Describe:
This verification is required at application, redetermination, or any time a parent is requesting an increase in the number of authorized child care hours based on changes in the number of training hours. Acceptable verification for training and education includes a copy of the class or training schedule signed by the education or training representative, or OCDEL's training or education form signed by the education or training representative.

☑️ **Family income.**

Describe:
This verification is required at application, redetermination, or any time the parent is requesting a reduction in co-payment based on decreased income. Acceptable verification of family income includes pay stubs, OCDEL's employment form, tax returns, a written statement signed by the employer, a benefit award letter, a copy of benefit check, a bank statement, a court order, or Domestic Relations office records.

☑️ **Household composition.**

Describe:
This verification is required one time at application or upon adding a new person to the case. Acceptable verification of household composition includes a birth certificate, custody order, medical or school records.

☑️ **Applicant residence.**

Describe:
This information is required at application and whenever a parent reports a new address. Acceptable verification of residence includes mail received by the parent or caretaker, a copy of a lease, a utility bill, a deed, a driver's license, or rental
agreement.

☐ Other.

Describe:
This verification is required at application or when a new child enters the family. Acceptable verification of care and control includes a court order, medical or school records, social service records, religious records, or Domestic Relations office records. Former TANF eligibility: This verification is required one time at application. Acceptable verification of the transfer of TANF benefits includes documentation by the CAO indicating that TANF benefits ended within Pennsylvania or another state within the past 183 days.

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

☐ Time limit for making eligibility determinations

Describe length of time:
For non-TANF families, the ELRC must determine eligibility no later than the 30th calendar day following receipt of a signed and dated application for subsidized child care. For TANF families, the CAO must determine eligibility no later than the 30th calendar day following receipt of a signed and dated application for TANF benefits. Following the determination of eligibility for TANF families, the CAO refers the family to the ELRC for subsidized child care benefits. The ELRC must contact the family no later than five calendar days from the receipt of the referral and must determine eligibility for enrollment no later than 15 calendar days from the receipt of the referral.

☐ Track and monitor the eligibility determination process

☐ Other.

Describe:

☐ None
3.1.11 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

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

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

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

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

a) Identify the TANF agency that established these criteria or definitions: OIM¿s Bureau of Policy in conjunction with the OCDEL¿s Bureau of Policy and Professional Development.

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

"Appropriate child care":
Child care operating in accordance with the PA state child care regulations and meeting the CCDBG regulations. This includes regulated child day care centers, group child day care homes, family child care homes, and informal care provided by a relative of the child(ren). Informal care is primarily provided in the caregiver's home. Informal care may be provided in the child's home when care outside of the child's home presents a risk to the child's health as documented by a licensed physician or psychologist, or when care occurs between the hours of 9:00 P.M. and 6:00 A.M. while the parent or caretaker is working.
"Reasonable distance":
Travel time to and from the work, education, or training site that includes travel time to the child care provider, which is one hour or less each way (two hours roundtrip), by reasonably available public or private transportation.

"Unsuitability of informal child care":
Any child care is unsuitable or inappropriate if it is reasonably expected to result in physical or serious emotional harm to the child.

"Affordable child care arrangements":
Child care that costs less than or equal to the DHS-established child care daily maximum allowances for payment of child care services.

c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
   - In writing
   - Verbally
   - Other.
   Describe:

d) Provide the citation for the TANF policy or procedure:
55 Pa. Code Chapter 165 Road to Economic Self-Sufficiency through Employment and Training (RESET) Program at § 165.21 (relating to exemptions from RESET participation requirements.

3.2 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).
Note:
CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

3.2.1 Describe how the Lead Agency defines:

a) "Children with special needs":
"Children with special needs" are defined as children between the ages of birth and 13 with physical, mental, and/or developmental disabilities. A child between the ages of 13 years, but younger than 19 years and who is incapable of caring for him/herself may continue to receive child care until the child no longer has the disability or turns 19 years of age. Children ages birth to 19 with developmental ages that are less than their chronological age are paid at their developmental age rate rather than their chronological age rate. The developmental rate is usually a higher rate, as our rates tend to decrease as the child ages.

b) "Families with very low incomes":
"Families with very low incomes" are defined as families that are receiving TANF or are transitioning off of TANF. Children residing in TANF and former TANF families are not subject to the waiting list and are enrolled immediately.

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

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

- [ ] Prioritize for enrollment
- [ ] Serve without placing these populations on waiting lists
- [ ] Waive copayments
- [ ] Pay higher rates for access to higher-quality care
- [ ] Use grants or contracts to reserve slots for priority populations
Children with a developmental delay are paid at the developmental age, not the chronological age. This payment is usually higher.

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

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

Describe:

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

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

Describe:

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

- [ ] Prioritize for enrollment
- [ ] Serve without placing these populations on waiting lists
- [ ] Waive copayments
- [ ] Pay higher rates for access to higher-quality care
3.2.3 List and define any other priority groups established by the Lead Agency.

The following children are placed on a prioritized waiting list: foster children – defined as a child in the legal custody of a children and youth agency, which maintains that custody while paying a licensed foster parent to care for the child; children who are enrolled in PA Pre-K Counts, Head Start, or Early Head Start who need wrap-around child care at the beginning and/or end of the program day; newborn siblings of children who are already enrolled and whose parent needs timely care so she can return to work; children experiencing homelessness as defined by the McKinney-Vento Homeless Assistance Act; and teen parents – defined as children under the age of 18 who are attending high school or participating in a GED program on a full-time basis; children 18 through 22 years of age who are attending high school or a cyber school as approved by the child’s school district, on a full-time basis.

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

These children are placed on a priority waiting list and receive child care funding first, before other children on the waiting list.

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

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

For families experiencing homelessness, a non-working parent is provided presumptive eligibility for 92 days, during which the parent may conduct a job search. The following eligibility requirements may not be waived: child's age; income limits; PA residency; child's citizenship. Verification of eligibility requirements may be waived for up to 183 days. Children experiencing homelessness are placed on a prioritized waiting list and receive funding sooner than others on the waiting list.

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

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

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

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

Note:
Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).
a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

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

  A 90-day period from the date the family is determined eligible to receive subsidy, to get immunizations if the child does not have them. Immunizations are not required if the child has a medical reason or the parent has religious reasons for not obtaining immunizations (§ 3041.46 (relating to immunization)). Immunizations are self-certified, meaning the parent self-attests to the fact that the child is properly immunized; this is accepted as sufficient proof of the child's immunization status (§ 3041.63(b)(3) (relating to self-certification)).

  Provide the citation for this policy and procedure.

  55 Pa. Code Chapter 3041 Subsidized Child Care Eligibility at § 3041.46 (relating to immunization); and § 3041.63(b)(3) (relating to self-certification).

  **Children who are in foster care.**

  A 90-day period from the date the family is determined eligible to receive subsidy, to get immunizations if the child does not have them. Immunizations are not required if the child has a medical reason or the parent has religious reasons for not obtaining immunizations (§ 3041.46 (relating to immunization)). Immunizations are self-certified, meaning the parent self-attests to the fact that the child is properly immunized; this is accepted as sufficient proof of the child's immunization status (§ 3041.63(b)(3) (relating to self-certification)).

  Provide the citation for this policy and procedure.

  55 Pa. Code Chapter 3041 Subsidized Child Care Eligibility at § 3041.46 (relating to immunization); and § 3041.63(b)(3) (relating to self-certification).

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

  The ELRCs provide referral information to families related to immunizations. Parents are
given up to 90 days to begin the process of acquiring age-appropriate immunizations for their children, unless there is a medical or religious reason to not do so. Regulated providers also accept the religious and medical exemption reasons and will not be cited for children who are not immunized based on the exemption reasons.

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

- No.
- Yes.

Describe:
All families are afforded the following protections in regard to obtaining documentation: A 90-day period from the date the family is determined eligible to receive subsidy, to get immunizations if the child does not have them. Immunizations are not required if the child has a medical reason or the parent has religious reasons for not obtaining immunizations (§ 3041.46 (relating to immunization)). Immunizations are self-certified, meaning the parent self-attests to the fact that the child is properly immunized; this is accepted as sufficient proof of the child's immunization status (§ 3041.63(b)(3) (relating to self-certification)). Parents can be determined eligible and receive an additional 30 days to provide documentation by "self-declaring" information that can be documented within the next 30 days (§ 3041.64 (relating to self-declaration)). Lastly, regulations state that the ELRC may not deny or terminate subsidy to a family when the parent has cooperated in the verification process and needed verification is pending or cannot be obtained due to circumstances beyond the parent's control (§ 3041.61(h) (relating to general verification requirements)).

3.3 Protection for Working Families
3.3.1 12-Month eligibility.

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

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

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

Families are eligible for no less than 12 months of continued eligibility before eligibility is re-determined, regardless of a temporary change in the ongoing status of the parent or caretaker's employment, job training or educational program, and increases in the family's annual income as long as the family income does not exceed 85 percent of the state median income for the family size. Families are not subject to termination based on temporary job, training or education loss such as summer/semester breaks, maternity leave or breaks in seasonal work. Parents and caretakers will not be ineligible for subsidy payments when experiencing a permanent break in work, training or education unless the loss continues beyond three months (92 days). Children who turn 13 years of age during the 12-month eligibility period remain eligible until the next redetermination date.
b) How does the Lead Agency define "temporary change?"
Any loss of employment that lasts for 92 days or less including family leave (parental and sick leave), seasonal work, student breaks or holidays, reduction in education or work hours, any other cessation of work that does not exceed 92 days. The parent must have a confirmed job that she is expected to return to at the end of the extended break or leave period. A temporary change also includes any change in age, including a child who turns 13 years of age during the eligibility period and any change of residence with Pennsylvania. As of the submission date of this plan, Pennsylvania had amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized.

c) Provide the citation for this policy and/or procedure.
The Pennsylvania Human Services Code at § 408.3(3.2)

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

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

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

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

☑ Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:
   Parents must be provided a period of continued eligibility of no less than 92 days for each non-temporary change.

ii. Describe what specific actions/changes trigger the job-search period.
   Non-temporary job or training loss that leaves the parent with zero work/training hours.

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

iv. Provide the citation for this policy or procedure.
   The Pennsylvania Human Services Code at § 408.3(3.2). As of the submission date of this plan, Pennsylvania had amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized.

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

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

i. Define the number of unexplained absences identified as excessive:
We make a number of attempts to contact parents to find out why children are not attending, prior to ending eligibility for excessive unexplained absences. If a child has been absent for 90 consecutive days, and we have been unable to contact the parent, we will send notice to the parent that the case will be closed.

ii. Provide the citation for this policy or procedure:
As of the submission date of this plan, Pennsylvania had amendments pending for subsidized child care regulations at 55 Pa. Code 3041. These regulatory amendments will improve the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized.

A change in residency outside of the state, territory, or tribal service area.
Provide the citation for this policy or procedure:
55 Pa. Code Chapter 3041 Subsidized Child Care Eligibility at § 3041.42 (related to residence).

Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.
Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.
Pennsylvania's definition of intentional program violation is reflected in 55 Pa. Code, Chapter 3041 Subsidized Child Care Eligibility, which defines fraud as "the intentional act of a parent or caretaker that results in obtaining, continuing or increasing child care subsidy for which the family is not eligible and that involves either a false or misleading statement or the failure to disclose information."
3.3.3 Change reporting during the 12-month eligibility period.

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

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

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

a) Does the Lead Agency require families to report a non-temporary change in a parent’s eligible activity?
   
   No
   Yes

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

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

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

Describe:

Income changes over 85 percent of the SMI.
Changes that impact the Lead Agency's ability to contact the family.
Describe:

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

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

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

- [x] Phone
- [x] Email
- [ ] Online forms
- [x] Extended submission hours
- [x] Postal Mail
- [x] FAX
- [x] In-person submission
- [ ] Other.
Describe:

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

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

A family may report a change in circumstances whenever a change occurs. The ELRC will take action if the change results in a decrease to the family's co-payment.
3.3.4 Prevent the disruption of employment, education, or job training activities

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

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

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.

- ✔ Advance notice to parents of pending redetermination
- ✔ Advance notice to providers of pending redetermination
- ✔ Pre-populated subsidy renewal form
- ✔ Online documentation submission
- ✔ Cross-program redeterminations
- ✔ Extended office hours (evenings and/or weekends)
b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

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

Describe:

3.4 Family Contribution to Payments

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

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

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

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than $0)</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?</td>
<td>The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?</td>
<td>Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?</td>
<td>The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>$1</td>
<td>$21.65</td>
<td>.004%</td>
<td>$24,120</td>
<td>$195.00</td>
<td>10%</td>
</tr>
<tr>
<td>2</td>
<td>$1</td>
<td>$21.65</td>
<td>.004%</td>
<td>$32,480</td>
<td>$277.00</td>
<td>10%</td>
</tr>
<tr>
<td>3</td>
<td>$1</td>
<td>$21.65</td>
<td>.004%</td>
<td>$40,840</td>
<td>$342.00</td>
<td>10%</td>
</tr>
<tr>
<td>4</td>
<td>$1</td>
<td>$21.65</td>
<td>.004%</td>
<td>$49,200</td>
<td>$411.00</td>
<td>10%</td>
</tr>
<tr>
<td>5</td>
<td>$1</td>
<td>$21.65</td>
<td>.004%</td>
<td>$57,560</td>
<td>$472.00</td>
<td>10%</td>
</tr>
</tbody>
</table>

b) What is the effective date of the sliding-fee scale(s)? May 2017
c) Identify the most populous area of the state used to complete the chart above.
Philadelphia
d) Provide the link to the sliding-fee scale:
https://www.pabulletin.com/secure/data/vol47/47-24/1015.html
e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).
N/A

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

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

Describe:

☐ Other.

Describe:

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

Describe:

☐ Other.

Describe:

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

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

☐ Number of hours the child is in care.
   Describe:

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

☐ Other.
   Describe:

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

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

☐ Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.

☐ Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.
   Describe the policy and provide the policy citation.

☐ Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.
   Describe the policy and provide the policy citation.
   Foster parents’ income is waived and they are charged the lowest co-pay ($5/week).
4 Ensure Equal Access to Child Care for Low-Income Children

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

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

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).
4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).

The child care certificate is issued once a parent selects a provider and the enrollment begins. It is sent to the provider and the parent and provides the date the enrollment begins for the child, the unit of care, hours of care each day and the amount of the co-pay.

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

Check all that apply.

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

4.1.3 Child care services available through grants or contracts.

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

☐ No. If no, skip to 4.1.4.

☑ Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots. Contracted slots for child care will be used in four ELRC Regions.

☐ Yes, statewide. If yes, describe:

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

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

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

   iv. The process for accessing grants or contracts:

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

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

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

4.1.3 Child care services available through grants or contracts.

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

☐ Programs to serve children with disabilities

☑ Programs to serve infants and toddlers

☐ Programs to serve school-age children

☐ Programs to serve children needing non-traditional hour care

☐ Programs to serve children experiencing homelessness
4.1.3 Child care services available through grants or contracts.

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

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

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

Pennsylvania child care regulations for all regulated providers state that providers need to give a parent access to their children at all times. This requirement is reviewed with providers...
during provider orientation meetings through the regional child care certification offices. It is also stated in the CCW Provider Agreement, which is reviewed with and signed by unregulated providers at the face-to-face meeting with their ELRC.

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

☐ No.

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

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

Describe:

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

Describe:
Related providers must be at least 18 years of age.

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

Describe:
In-home care may only be used by a parent/caretaker between the hours of 9:00 p.m. and 6:00 a.m.

☐ Restricted to care by relatives.

Describe:
Relatives as defined in the Child Care and Development Block Grant.
Restricted to care for children with special needs or a medical condition.

Describe:
In-home care is permitted at any time where care outside the home is a risk to the child's health. The child's health condition and risk to health must be documented by a licensed physician or psychologist and explain the necessity for in-home care for reasons related to the child's health.

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

Describe:

Other.

Describe:
While Pennsylvania does not restrict in-home care to a minimum number of children in order to meet the minimum wage requirement, if the ELRC payment and parent's co-payment do not equal the minimum hourly wage, the parent is required to pay the provider the additional amount necessary to meet the minimum wage requirements. The parent must also agree to pay applicable federal and state taxes per the IRS Household Employers Tax Guide.

4.2 Assessing Market Rates and Child Care Costs

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

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

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.

- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.

- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care: such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.

- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.

- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.

- Describe how the alternative methodology will use current, up to date data.

- Describe the estimated reporting burden and cost to conduct the approach.

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

Describe how the Lead Agency consulted with the:

   a) State Advisory Council or similar coordinating body:
   OCDEL discusses with the ELC the plan for gathering rate information. This includes traditional survey, as well as, payment information from the provider's profile in Provider Self-Service.

   b) Local child care program administrators:
   Representation on the ELC.

   c) Local child care resource and referral agencies:
   Representation on the ELC

   d) Organizations representing caregivers, teachers, and directors:
   In August 2016, representatives from OCDEL met with PACCA and PennAEYC to discuss the strategy and timeline for the 2016 market rate survey (MRS).

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

In July 2018, OCDEL’s sub-grantees, the Early Learning Resource Centers (ELRCs) conducted a 100% canvas of provider rates by obtaining updated, signed payment agreements. This was necessary as part of implementation of the ELRC framework. OCDEL leveraged the opportunity as a market rate survey to assess current private rates against the Maximum Child Care Allowances (MCCAs) with quality add-on’s. Through this process, OCDEL was able to obtain updated rate information from approximately 6,560 regulated providers participating in the subsidized child care program. This represented 89.5% of all regulated providers, which include center-based care, group child care and family child care homes. The survey was state-wide across all 67 counties, including the larger metropolitan areas of Philadelphia and Pittsburgh.

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

a) Geographic area (e.g., statewide or local markets). Describe:
All 67 counties in Pennsylvania are represented in the market rate survey. Child care costs in urban areas are higher than in rural areas.

b) Type of provider. Describe:
Center costs are higher than costs for family child care home and group child care home programs.
c) Age of child. Describe:
Infant costs are significantly higher than costs for other care levels. In general, the younger the age of the child, the higher the costs of a child's care.

d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level.
No other key variations were used in the most recent MRS.

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

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

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 09/30/2016

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. Analysis of the findings was completed in August 2017 and the report was posted to the DHS website at www.dhs.pa.gov in October 2017.

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.
In July 2018, OCDEL's sub-grantees, the Early Learning Resource Centers (ELRCs) conducted a 100% canvas of provider rates by obtaining updated, signed payment
agreements. This was necessary as part of implementation of the ELRC framework. OCDEL leveraged the opportunity as a market rate survey to assess current private rates against the Maximum Child Care Allowances (MCCAs) with quality add-on's.

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.
PACCA’s and PennAEYC’s views were considered when writing the report.

4.3 Setting Payment Rates

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

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

a) Infant (6 months), full-time licensed center care in the most populous geographic region
Rate $ 213.45 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 17.9 percent

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
Rate $ 172.45 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 14.4 percent

c) Toddler (18 months), full-time licensed center care in the most populous geographic region
Rate $ 208.39 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 29.2 percent

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
Rate $ 157.10 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 13.3 percent

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate $ 167.35 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 17.3 percent

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
Rate $ 142.75 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 15.1 percent

g) School-age child (6 years), full-time licensed center care in most populous geographic region
Rate $ 138.65 per week unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 26.5 percent

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate $ 131.45 per week unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 24.5 percent

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

Full-time care is five or more hours of care per day. Part-time care is care for fewer than five hours a day.
j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 2007
k) Identify the most populous area of the state used to complete the responses above. Philadelphia

l) Provide the citation or link, if available, to the payment rates. http://www.dhs.state.pa.us/cs/groups/webcontent/documents/document/p_022773.pdf
m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)). N/A

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

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

☐ Differential rate for non-traditional hours.
Describe:

☐ Differential rate for children with special needs, as defined by the state/territory.
Describe:
Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:
Providers with a Keystone STARS designation of 2, 3, or 4 receive a daily tiered reimbursement rate for each subsidized child enrolled. The amount increases with the STAR level. Effective August 1, 2017, the daily tiered amounts for infants in full-time care are $1.55 for STAR 2, $6.80 for STAR 3 and $10.30 for STAR 4. Effective the same date, the daily tiered amounts for toddlers in full-time care are $1.45 for STAR 2, $6.60 for STAR 3 and $10.10 for STAR 4.

Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:
Providers with a Keystone STARS designation of 2, 3 or 4 receive a daily tiered reimbursement rate for each subsidized child enrolled. The amount increases with the STAR level. Effective August 1, 2017, the daily tiered amounts for school age children in full-time care are $.95 for STAR 2, $5.90 for STAR 3 and $9.20 for STAR 4.

Differential rate for higher quality, as defined by the state/territory.

Describe:
Providers with a Keystone STARS designation of 2, 3, or 4 receive a daily tiered reimbursement for each subsidized child enrolled. The amount increases with the STAR level. Pennsylvania defines high quality as STAR 3 and STAR 4. Effective August 1, 2017, the daily tiered amounts for infants in full-time care are $6.80 for STAR 3 and $10.30 for STAR 4; for toddlers in full-time care $6.60 for STAR 3 and $10.10 for STAR 4; for preschool children in full-time care $5.90 for STAR 3 and $9.20 for STAR 4; for school-age children in full-time care $5.90 for STAR 3 and $9.20 for STAR 4.

Other differential rates or tiered rates.

Describe:

Tiered or differential rates are not implemented.
4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

When child care facilities are initially licensed, their information is immediately shared with the ELRC grantee through the PELICAN system. The grantee contacts newly licensed providers, which include child care centers, group child care facilities and family child care homes, to offer participation in the subsidized child care program. The ELRC explains the full range of benefits of participating in the subsidized child care program, including participation in Keystone STARS and the ability to receive more robust payment. Providers willing to accept subsidized children into enrollment sign a contract with the ELRC. Providers may also be identified by the subsidy family; if so, the same process is followed to engage the provider in a contract to serve subsidy children. In both cases, ELRCs make information about the full range of care options with families. This information is also publicly available at www.findchildcare.pa.gov. As of July 2018, 89.5% of all licensed providers had agreements to accept subsidy children into enrollment.

Barriers to licensed providers participating in the subsidized child care program include payment rates that fall short of private market rates, religious or cultural affiliations of facilities that may prohibit them from accepting subsidized funding, and business/operational challenges that facilities do not want to undertake.

b) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology. Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have
increased, Lead Agencies must raise their rates as a result. The base payment rates were not changed per the MRS. The quality add on-rates were increased on 8/1/2017.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.
The quality add-on rate is established to add a higher payment rate for infants and toddlers, and a higher payment rate for the STAR level achieved (STAR 2-4) by a program.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

In June 2017, OCDEL commissioned a study of the true cost of quality. Titled "Child Care Funding & Finance in Pennsylvania: Budgeting for Survival or Paying for the True Cost of Quality?", an executive summary of the study can be found at: https://www.researchforaction.org/projects/examining-gaps-state-child-care-subsidy-reimbursement-rates-cost-quality-early-education/The study focused on six facilities operating at high quality. The facilities included two large urban sites, one small urban site, one suburban site and two rural sites. The legal entity structures of these facilities included non-profits, small for-profit businesses and a faith-based organization. The study concluded that: Infant and toddler care is more expensive to provide than pre-K or school-age care; Current revenue streams and reimbursement rates are inadequate to support the care of infants and toddlers; Providers are opting to serve more preschoolers; Compensation in child care centers is far lower than in public school districts. Given these findings, OCDEL took steps to improve payment rates, particularly to providers serving infants and toddlers and those operating at higher quality levels. Consequently: Keystone STARS Tiered Reimbursement Quality Add-On Rates were increased July 1, 2017; the "freeze" on payment rates that had been in place since 2007 was lifted for providers operating at STAR 3 and STAR 4 levels effective January 1, 2018 and for providers operating at STAR 1 and STAR 2 effective August 1, 2018; the Maximum Child Care Allowances (MCCAs) across all provider types, ages of children,
geographies and STAR levels were improved by 2.5% effective August 1, 2018 using increased discretionary funding. When add-on amounts for tiered reimbursement are blended with the corresponding MCCAs, the rates align more closely with private market rates at the 75th percentile. All licensed child care providers in the state are operating at a STAR 1 level or above. As of August 2018, approximately 24% of them were operating at the highest quality levels of STAR 3 and STAR 4. And as of the same month, 33% of children in the subsidized child care program were enrolled at STAR 3 and STAR 4 programs. While this is indicative of the investment Pennsylvania is making to build access to quality and to support providers operating in the quality rating improvement system, more work is planned to increase capacity for and access to high quality care for all Pennsylvania children.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

- Limit the maximum co-payment per family.
  Describe: .

- Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and
  Families with income at or below 100 percent of the FPIG pay a co-pay equivalent to about 8 percent of their income. Families with income above 100 percent of the FPIG pay a co-pay equivalent to about 11 percent of their income.

- Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

- Other.
  Describe:

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds
the subsidy payment (98.45(b)(5))?  

☐ No  
☐ Yes. If yes:  

i. Provide the rationale for the Lead Agency’s policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families. OCDELD does not prescribe this for providers serving CCDF children. Providers make independent business decisions in order to be able to remain operational and continue to serve children.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families. OCDELD does not have data regarding providers charging additional amounts to families.

iii. Describe the Lead Agency’s analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees. OCDELD does not have data regarding providers charging additional amounts to families.

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

Providers must sign a payment with the ELRC grantee before any subsidy children can be enrolled at the program. Once the agreement is in place, the provider submits signed invoices each month to the ELRC. The invoices include enrollment and schedule details for all the subsidy children enrolled at the program. The invoices are generated by the ELRC to providers near the end of the service (calendar) month. Providers record attendance exceptions on the invoice. They are paid based on the child’s enrollment, including days the child may have been absent but only up to 40 days in the state fiscal year. Any absence days over 40 are not paid by the ELRC with one exception, children receiving child care funding through the Supplemental Nutrition Assistance Program (SNAP). There is no limit to the number of absence days for children receiving SNAP child care. The 40-day limit is a cumulative number per child; the parent/caretaker is responsible to pay the provider for absences that exceed 40 days in the fiscal year. If the
provider submits the completed invoice to the ELRC by the 5th calendar day of the
month following the service month, the ELRC must make payment by no later than the
20th of that month. Child care providers are paid a full-time rate for care provided for five
or more hours per day and a part-time rate for care less than five hours per day. Child
care providers receive a copy of all notices that are sent to the parent or caretaker.
These notices document action that negatively affects the eligibility status of the family.
Providers who use the Department's on-line Provider Self-Service (PSS) can choose to
receive correspondence through the portal and are notified when correspondence is
available through an email and an alert. Providers who utilize PSS for invoicing can see
each child's daily schedule that includes if an enrollment is discontinued due to eligibility
or suspension. The ELRC reviews the payment practices and policies outlined in the
provider agreement with providers to insure they understand rules and requirements.
ELRCs are required under the grant to address and resolve any payment inaccuracies or
disputes in a timely manner. If the ELRC and provider cannot resolve the dispute, the
issue is escalated to OCDEL for resolution. These rules and procedures insure, to a high
degree, timely and accurate payment for child care services and afford confidence and
reliability to providers serving subsidy children.

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

- Geographic area.
  Describe:
  The Maximum Child Care Allowance (MCCA) is based on the county where care is
  received.

- Type of provider.
  Describe:
  The MCCA is based on whether the provider is a center, a group child care home,
or a family child care home.

- Age of child.
  Describe:
  The MCCA is based on the age of the child being served.
Quality level.

Describe:

Quality add-on amounts are based on the STAR level achieved (STAR 2-4) by the program and a higher add-on amount is paid for infants and toddlers.

Other.

Describe:

The MCCA is based on the unit of care, full-time versus part-time.

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

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

Describe:

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

Describe:

- Feedback from parents, including parent surveys or parental complaints.

Describe:

Through resource and referral services agencies, families report being able to find quality child care.

Other.

Describe:

4.5 Payment Practices and the Timeliness of Payments

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

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

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

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

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

☐ Paying prospectively prior to the delivery of services.
Describe the policy or procedure.

☒ Paying within no more than 21 calendar days of the receipt of a complete invoice for services.
Describe the policy or procedure.

Providers submit signed invoices by the 5th calendar day of the month following the
month in which services were provided. The ELRC must make the payment by the 20th calendar day of the month following the month in which services were provided.

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

- **☑ Paying based on a child's enrollment rather than attendance.**
  
  Describe the policy or procedure.
  
  Providers are issued an attendance invoice each month. Providers record attendance exceptions on the invoice. Providers are paid based on each child's enrollment, except for absence days greater than 40 days.

- **☑ Providing full payment if a child attends at least 85 percent of the authorized time.**
  
  Describe the policy or procedure.
  
  Beginning 7/1/2018, child care will be paid for a maximum of 40 days of absence days during the state fiscal year (July 1- June 30) for each child. Children funded through SNAP are not subject to a limit on absence days. The 40-day limit is a cumulative number per child, regardless of provider transfer during the fiscal year. The parent/caretaker is responsible to pay the provider for absences that exceed 40 days per year.

- **☐ Providing full payment if a child is absent for five or fewer days in a month.**
  
  Describe the policy or procedure.

- **☐ Use an alternative approach for which the Lead Agency provides a justification in its Plan.**
  
  If chosen, please describe the policy or procedure and the Lead Agency’s justification for this approach.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency
provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).
Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).
Child care providers are paid a full-time rate for care provided for five or more hours per day and a part-time rate for care provided in blocks of less than five hours per day.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.
Describe the policy or procedure.
Registration fees are not universally charged by licensed providers in Pennsylvania. Therefore, providers who charge such fees are instructed to account for those when reporting payment rates on their provider agreement or entering them in the Provider Self Service system. Any mandatory registration fees that are not accounted for may be accommodated through a one-time adjustment to a provider's payment using the PELICAN-CCW system.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:
The ELRC reviews payment practices and policies detailed in the regulated CCW Provider Agreement. The provider must sign the agreement before any children can be enrolled at the program. The dispute resolution policy is that the provider contacts the ELRC agency to try to resolve the issue. If the ELRC and provider cannot resolve the dispute, the issue is escalated to the OCDEL subsidy coordinator who brings the issue to OCDEL headquarters for resolution.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.
Describe:
Child care providers receive a copy of all adverse action notices that are sent to the parent or caretaker. These notices document action that negatively affects the eligibility status of an individual or a case. Provider who use Provider Self-Service can choose to receive correspondence through the portal and are notified when correspondence is available through an email and an alert. Providers who utilize Provider Self-Service for invoicing can see each child’s daily schedule that includes if an enrollment is discontinued due to eligibility or suspension.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:
ELRCs are required under the grant to address and resolve any payment inaccuracies or disputes in a timely manner.

g) Other. Describe:
N/A

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

☑ No, the practices do not vary across areas.
☐ Yes, the practices vary across areas.
Describe:

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

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).
4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.

- In licensed family child care.
  The certification facilities report is used to identify where licensed regulated care exists and indicates at what quality rating level the provider is operating. This report is made available to the ELRC to identify areas where capacity for quality needs to grow.

- In licensed child care centers.
  The certification facilities report is used to identify where licensed regulated care exists and indicates at what quality rating level the provider is operating. This report is made available to the ELRC to identify areas where capacity for quality needs to grow.

- Other.
  N/A

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

a) Children in underserved areas. Check and describe all that apply.
   - Grants and contracts (as discussed in 4.1.3).
     Describe:

   - Family child care networks.
     Describe:

   - Start-up funding.
     Describe:
Technical assistance support.
Describe:
ELRCs are instructed to target STAR 1 and STAR 2 programs serving high numbers of children accessing CCW to ensure that vulnerable children have access to high-quality care. In addition, this targeting ensures that children accessing CCW funding have high-quality options in their home communities.

Recruitment of providers.
Describe:

Tiered payment rates (as discussed in 4.3.2).
Describe:
Keystone STARS tiered add-ons incentivize programs to increase their quality and STAR level and help to off-set the higher costs of providing high-quality child care. The STARS add-ons begin at STAR 2 and increase through STAR 4 across all program types and care levels.

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

Accreditation supports.
Describe:
Providers may choose to use their STAR 2 Keystone STARS Merit Award to pursue an accreditation type identified as "reciprocal" in the Keystone STARS performance standards.

Child Care Health Consultation.
Describe:
Child care health consultants are placed at the ELRCs and are intended to provide rapid response where necessary while also providing general best practice and professional development to providers. This model allows providers to maintain children's enrollment if they have a special need (like medication administration) and supports providers in building a high-quality environment for all children.
Mental Health Consultation.

Describe:
The Early Childhood Mental Health (ECMH) project is a child-specific consultation model available to early learning programs across PA who participate in Keystone STARS (QRIS). The project focuses on reducing the number of children expelled from child care due to behavior challenges, increasing understanding among ECE practitioners and families of social-emotional development and its impact on educational success, and linking and bridging systems and services on behalf of the child, family, and program.

Other.

Describe:

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

b) Infants and toddlers. Check and describe all that apply.

- Grants and contracts (as discussed in 4.1.3).
  Describe:
  Pennsylvania is piloting contracting for infant and toddlers slots in four ELRC regions. This pilot will take place in existing STAR 3 and 4 programs and will identify opportunities to stabilize care arrangements for families and enrollment for providers.

- Family child care networks.
  Describe:

- Start-up funding.
  Describe:

- Technical assistance support.
  Describe:
  Infant Toddler Specialists' are available to providers for targeted technical
assistance on developmentally appropriate practices for infants and toddlers, and other areas of need specific to physical health and development of children 0-3 years old.

☐ Recruitment of providers.
   Describe:

☐ Tiered payment rates (as discussed in 4.3.2).
   Describe:
   Keystone STARS tiered add-ons incentivize programs to increase their quality and STAR level and help to off-set the higher costs of providing high-quality child care. The STARS add-ons begin at STAR 2 and increase through STAR 4 across all program types and care levels which include higher rates paid for infants and toddlers.

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

☐ Accreditation supports.
   Describe:

☐ Child Care Health Consultation.
   Describe:
   Child care health consultants are placed at the ELRCs and are intended to provide rapid response where necessary while also providing general best practice and professional development to providers. This model allows providers to maintain children's enrollment if they have a special need (like medication administration) and supports providers in building a high-quality environment for all children.

☐ Mental Health Consultation.
   Describe:
   The Early Childhood Mental Health (ECMH) project is a child-specific consultation model available to early learning programs across PA who participate in Keystone Pennsylvania
STARS (QRIS). The project focuses on reducing the number of children expelled from child care due to behavior challenges, increasing understanding among ECE practitioners and families of social-emotional development and its impact on educational success, and linking and bridging systems and services on behalf of the child, family, and program.

☐ Other.
  Describe:

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

c) Children with disabilities. Check and describe all that apply.
  ☐ Grants and contracts (as discussed in 4.1.3).
    Describe:

  ☐ Family child care networks.
    Describe:

  ☐ Start-up funding.
    Describe:

  ☐ Technical assistance support.
    Describe:

  ☐ Recruitment of providers.
    Describe:

  ☐ Tiered payment rates (as discussed in 4.3.2).
    Describe:

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

☐ Accreditation supports.
Describe:

☑ Child Care Health Consultation.
Describe:
Child care health consultants are placed at the ELRCs and are intended to provide rapid response where necessary while also providing general best practice and professional development to providers. This model allows providers to maintain children's enrollment if they have a special need (like medication administration) and supports providers in building a high-quality environment for all children.

☑ Mental Health Consultation.
Describe:
The Early Childhood Mental Health (ECMH) project is a child-specific consultation model available to early learning programs across PA who participate in Keystone STARS (QRIS). The project focuses on reducing the number of children expelled from child care due to behavior challenges, increasing understanding among ECE practitioners and families of social-emotional development and its impact on educational success, and linking and bridging systems and services on behalf of the child, family, and program.

☐ Other.
Describe:

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

d) Children who receive care during non-traditional hours. Check and describe all that apply
☐ Grants and contracts (as discussed in 4.1.3).
Describe:
Family child care networks.
Describe:

Start-up funding.
Describe:

Technical assistance support.
Describe:

Recruitment of providers.
Describe:

Tiered payment rates (as discussed in 4.3.2).
Describe:

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

Accreditation supports.
Describe:

Child Care Health Consultation.
Describe:
Child care health consultants are placed at the ELRCs and are intended to provide rapid response where necessary while also providing general best practice and professional development to providers. This model allows providers to maintain children's enrollment if they have a special need (like medication administration) and supports providers in building a high-quality environment for all children.

Mental Health Consultation.
Describe:
The Early Childhood Mental Health (ECMH) project is a child-specific consultation model available to early learning programs across PA who participate in Keystone Pennsylvania.
STARS (QRIS). The project focuses on reducing the number of children expelled from child care due to behavior challenges, increasing understanding among ECE practitioners and families of social-emotional development and its impact on educational success, and linking and bridging systems and services on behalf of the child, family, and program.

☐ Other.
Describe:

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

e) Other. Check and describe all that apply:

☐ Grants and contracts (as discussed in 4.1.3).
Describe:

☐ Family child care networks.
Describe:

☐ Start-up funding.
Describe:

☐ Technical assistance support.
Describe:

☐ Recruitment of providers.
Describe:

☐ Tiered payment rates (as discussed in 4.3.2).
Describe:

☐ Support for improving business practices, such as management training, paid sick leave, and shared services.
4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

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

OCDEL annually produces a "Reach and Risk Report" that clearly defines areas of significant concentrations of poverty and unemployment where vulnerable children and families reside. Pennsylvania defines "vulnerable" as those children living in families at or below 300 percent of the federal poverty level, children enrolled in the child welfare system, migrant families, children living in families experiencing homelessness, and children with special needs. The OCDEL Reach and Risk Assessment combines multiple data sources to produce an analysis of key economic, maternal, birth outcome, academic, and toxic stress risk factors that can harm a child's chances of doing well in kindergarten and beyond. To identify areas of significant concentrations or poverty/economic risk indicators, the following information and data sources were used:

Pennsylvania Department of Education (PDE) data for percentage of children receiving
free/reduced lunch; and American Community Survey Five Year Estimates as it relates to: the percentage of children under age five living in economically high-risk families, 100 percent federal poverty level; and the percentage of children under age five living in economically at-risk families, 300 percent federal poverty level. The findings support OCDEL administrators to make decisions on where vulnerable and underserved children live, and how best to target resources to serve them. An Average Risk Level (ARL) score is determined for each of Pennsylvania’s counties. Each of the risk indicators are reported as a percentage at the county, allowing for comparison across counties of varying population sizes. The percentages are placed into four equal sized groups called quartiles, each containing 25 percent of the counties. A rating of one (low risk) to four (high risk) is assigned to each quartile for each risk factor; the top 25 percent are high risk and the bottom 25 percent were low risk. The sums of the risk indicators for each county are averaged to determine an overall ARL. This is the average quartile ranking for a county across the risk indicators. The ARLs are then classified into risk categories. ARL scores are combined with data that identifies funding sources and the enrollment number of children serviced through programs that directly support quality ECE and those that operate through community and school level systems that support quality and access to quality ECE. The subsequent analysis then presents a picture of the children and regions most likely to benefit from continued, increased investment.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. In Pennsylvania's current system, investments are prioritized to programs providing high-quality child care through Keystone STARS. As child care providers are designated at increasingly higher levels of quality, they receive higher tiered quality add-on reimbursements for children receiving CCW. OCDEL is committed to routinely increasing the add-on rates to further enhance the financial incentives for programs serving eligible children. Pennsylvania prioritizes funding to incentivize lower quality programs to move forward in Keystone STARS through additional grants and awards. Under Pennsylvania's current structure, STAR 2 programs serving a minimum percentage of combined enrollment of low-income children and children receiving EI services can apply for Merit Awards to support ongoing activities to further build quality. In addition, eligible programs may also receive Education and Retention Awards to incentivize highly qualified staff to remain at STAR 2, 3, and 4 programs serving children receiving subsidized child care.
The Education and Retention Awards are scaled in two ways: first to reflect the credential or degree of the staff person; second to link to the level of quality award for STAR 2, 3, and 4.

5 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important
to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.

- Center-based child care.
  Describe and Provide the citation:
  Pennsylvania defines a child care center as the premises in which care is provided at any one time for seven or more children unrelated to the operator. The regulations for child care centers reside at 55 Pa. Code 3270, et. seq. As well, Pennsylvania also certifies facilities it calls Group Child Care Homes. A Group Home is the premises in which care is provided at one time for more than six but fewer than 16 older school-age level children or more than six but fewer than 13 children of another age level who are unrelated to the operator. A group home may operate in a residence or another premises. The regulations for group child care homes reside at 55 Pa. Code 3280, et. seq.

- Family child care.
5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. Providers who are related to the children as defined in the CCDBG are exempt from state certification regulations. Relatives self-certify compliance with health and safety requirements. As a funding standard, these relative providers must meet the following minimum health and safety requirements: Follow hand washing protocol to prevent and control the spread of contagious diseases. Have a working smoke detector on each level of the home in which child care is provided. Ensure conditions in the home do not pose a threat to the health and safety of the children in care. Lock cleaning materials and other toxic materials in areas away from the children. Lock both weapons and ammunition in areas separate from each other. Relative providers must also obtain federal and state criminal, and child abuse background clearances.

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption
Center-based child care.
If checked, describe the exemptions.

Family child care.
If checked, describe the exemptions.

In-home care.
If checked, describe the exemptions.
Only persons related to a child are permitted to provide in-home care. Related caregivers are exempt.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

a) Licensed CCDF center-based care

1. Infant
   -- How does the State/territory define infant (age range):
   A child from birth to one year of age.

   -- Ratio:
   4:1
-- Group size:
Group size is 8

-- Teacher/caregiver qualifications:
Age 18, high school diploma or GED with secondary training hours or work experience. Assistant teacher qualifications, age 18, high school diploma or GED with secondary training hours or work experience.

2. Toddler
   -- How does the State/territory define toddler (age range):
   A child from one to two years of age is defined as a young toddler. A child from two to three years of age is defined as an older toddler.

   -- Ratio:
   5:1 for young toddler and 6:1 for older toddler.

   -- Group size:
   10 for young toddler and 12 for older toddler.

   -- Teacher/caregiver qualifications:
   Age 18, high school diploma or GED with secondary training hours or work experience. Assistant teacher qualifications, age 18, high school diploma or GED with secondary training hours or work experience.

3. Preschool
   -- How does the State/territory define preschool (age range):
   A child from three years of age to the date the child enters kindergarten in a public or private school system.

   -- Ratio:
   10:1
-- Group size:
20

-- Teacher/caregiver qualifications:
Age 18, high school diploma or GED with secondary training hours or work experience. Assistant teacher qualifications, age 18, high school diploma or GED with secondary training hours or work experience.

4. School-age
   -- How does the State/territory define school-age (age range):
   A child who attends kindergarten to the date the child enters the 4th grade is young school-age child and a child who attends the 4th grade through 15 years of age is an older school age child.

   -- Ratio:
   12:1 for young school age and 15:1 for older school age.

   -- Group size:
   24 for young school-age and 30 for older school age.

   -- Teacher/caregiver qualifications:
   Age 18, high school diploma or GED with secondary training hours or work experience. Assistant teacher qualifications, age 18, high school diploma or GED with secondary training hours or work experience.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers
N/A. Child care centers are not exempted.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.
When children are grouped in mixed age levels, the age of the youngest child in the group determines the staff:child ratio and maximum group size is in accordance with the group size for similar age level.
7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

To become the director of a child care center in Pennsylvania, such individual must have attained either a bachelor's or associate degree from an accredited college or university. If the bachelor's degree is in early childhood education, child development, special education, elementary education or the human services field, then he or she must have one year of experience with children. If the bachelor's is not in those fields, then he or she must have earned 30 credit hours in early childhood education, child development, special education, elementary education or the human services field and have two years of experience with children. If the person has an associate's degree in early childhood education, child development, special education, elementary education or the human services field, then he or she must have three years of experience with children. If the associate's is not in those fields, then he or she must have earned 30 credit hours in early childhood education, child development, special education, elementary education or the human services field and have four years of experience with children.

b) Licensed CCDF family child care provider

1. Infant

   -- How does the State/territory define infant (age range):
   A child from birth to one year of age.

   -- Ratio:
   The operator may provide care to no more than five related and unrelated infants and toddlers at any one time. No more than two related and unrelated infants may receive care at any one time. The following numbers of infants and toddlers are permitted in a family day care home: (1) If no infants are in care, five toddlers are permitted. (2) If one infant is in care, four toddlers are permitted. (3) If two infants are in care, three toddlers are permitted.

   -- Group size:
   Group size is 6.
-- Teacher/caregiver qualifications:
Age 18, high school diploma or GED.

2. Toddler
   -- How does the State/territory define toddler (age range):
   A child from one to two years of age is defined as a young toddler. A child from 2 to 3 years of age is defined as an older toddler.

   -- Ratio:
   6:1

   -- Group size:
   Group size is 6.

   -- Teacher/caregiver qualifications:
   Age 18, high school diploma or GED.

3. Preschool
   -- How does the State/territory define preschool (age range):
   A child from 3 years of age to the date the child enters kindergarten in a public or private school system.

   -- Ratio:
   6:1

   -- Group size:
   Group size is 6.

   -- Teacher/caregiver qualifications:
   Age 18, high school diploma or GED.
4. School-age
   -- How does the State/territory define school-age (age range):
     Young school-age child-A child who attends kindergarten to the date the child enters the 4th grade of a public or private school system. Older school-age child-A child who attends the 4th grade of a public or private school system through 15 years of age.

   -- Ratio:
     6:1

   -- Group size:
     Group size is 6.

   -- Teacher/caregiver qualifications:
     Age 18, high school diploma or GED.

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes
   Pennsylvania does not exempt family child care homes.

c) In-home CCDF providers:
   1. Describe the ratios
     1:3 unless they are grandchildren. A grandparent may care for up to six grandchildren as long as no other children are present.

   2. Describe the group size
     Three for relatives other than grandparents. Six for grandparents.

   3. Describe the maximum number of children that are allowed in the home at any one time.
     Three unless they are all grandchildren. Grandparents may care for up to six grandchildren.
4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size
N/A

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day
For grandparents, up to five infants and toddlers.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

1. Prevention and control of infectious diseases (including immunization)
   -- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
   All health reports require a statement that the child is free from contagious disease and a record of the child's immunizations. The facility also must adhere to the DOH regulations relating to immunizations. Prevention of infectious disease results from the regulatory requirement that children receive the proper immunizations pursuant to the recommendations of the Advisory Committee on Immunization Practices (ACIP).
Control for infectious disease results from the regulatory requirements that parents be notified when there is a suspected outbreak of a communicable disease or an outbreak of an unusual illness that represents a public health emergency; as well, facility persons must report suspected cases of communicable disease or group expression to the appropriate division of the Department of Health as specified in 28 Pa Code Chapter 27.

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

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this standard.

-- Describe any variations based on the age of the children in care
Reports must be completed every 6 months for an infant and young toddler; every 12 months for older toddler and preschool child. School health reports are accepted for older children.

-- Describe if relatives are exempt from this requirement
Yes.

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

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Infants must be placed in the sleeping position recommended by the American Academy of Pediatrics, and all cribs must be free of toys, bumper pads, and pillows. In addition, individual, clean, age-appropriate rest equipment shall be provided to preschool, toddler, and infant children as agreed to by operator and parent.
3. Administration of medication, consistent with standards for parental consent

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

All medications must be administered pursuant to current regulations, including but not limited to mandatory signed, written parental consent to administer medication. As a matter of practice, regulations require that medication be accepted only in an original container; is administered by staff pursuant to parental consent; is identified on the label by its name; identifies the name of the child for whom the medication is intended; that medication is stored in a locked area of the facility or in an area that is out of reach of children, in accordance with the manufacturer's/health professional's instructions; and that medication, once administered, is recorded in a medication log established and maintained by the operator.

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

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

Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Yes.

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

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

All facility phones must list phone numbers for the nearest hospital, police department, fire department, ambulance, and poison control center. All health reports must list the child's allergies, and regulations require that one or more facility persons be competent in first aid. Emergency contact information for the child includes information on the child's special needs, as specified by the child's parent, physician, physician's assistance or CRNP, which is needed in an emergency situation. During an emergency, a staff person must accompany and stay with the child and document the emergency. A written plan identifying the means of transporting a child to emergency care and staffing provisions in the event of an emergency shall be displayed conspicuously in every child care space and accompany a staff person who leaves on an excursion with children. Prevention is contemplated in the requirement for providers to establish and regularly update children's health reports to specifically include information about a child's allergies. If emergency medical care is needed for a child, the child's parent must be contacted per Department regulation as soon as possible by a staff person.

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

3270.132, and 3270.133

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

Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Yes.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

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

As a condition precedent for certification, the facility must provide a certificate of occupancy per Pennsylvania Department of Labor and Industry regulations concerning child care facilities. Physical site regulations further concern safety, including but not limited to outdoor space, outside walkways, electrical covers, toxics, sanitation, smoking, water, hot water pipes, paint, glass, and ventilation. Regulations have been promulgated that require all building surfaces be free from visible hazards; that require operators to notify parents and local authorities about vehicular routes, pickup, and dropoff points around the facility; that require operators to secure and store toxics such that they are made inaccessible to children and do not contaminate food areas or play surfaces; that require operators to ensure hot water temperatures do not exceed 110° F and that hot water pipes accessible to children be insulated; that require operators to ensure that protective receptacle covers are used in all electrical outlets accessible to children; that require operators to render inaccessible to children access to any in-ground (via fencing with a locked gate), above-ground, and indoor swimming pools; and that require operators to otherwise use fencing or natural
barriers to restrict children from unsafe areas or conditions in or near outdoor play spaces.

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

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
Yes.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Staff may not use any form of physical discipline, including spanking a child; they may not single out a child for ridicule or otherwise degrade or threaten a child or the child's family; they may not use harsh, demeaning or abusive language in the presence of children; they may not restrain a child by using bonds, ties or straps to restrict a child's movement nor may staff enclose a child in a confined space, closet, or locked room. Additionally staff must obtain training regarding child abuse and mistreatment as required by the child protective services law.

-- List all citations for these requirements, including those for licensed and license-exempt providers
55 Pa. Code 3270.32, 3270.113
-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
Yes.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
It is a regulatory requirement that all facilities must provide an emergency plan that contains emergency procedures for sheltering all children during emergency at a shelter in the facility or a shelter at locations away from the facility premises; that provides for the evacuation of all children from the facility and to a location away from the facility premises; that requires facility persons to contact parents as soon as possible in the event of an emergency and to inform parents when an emergency ends with instruction on how to safely reunite with their children. As well, the emergency plan must be completed and on file prior to the operation of the facility, and it must be posted conspicuously in the facility, with a copy sent to the county emergency management agency along with any and all subsequent updates to the plan. Staff must be trained in the facility's emergency plan within one week of initial
employment, on an annual basis, and at the time of each plan update, with all such training documented in writing and kept on file at the facility.

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

55 Pa. Code 3270.27. As of the submission date of this plan, Pennsylvania has amendments pending for the health and safety regulations at 55 Pa. Code 3270, 3280 and 3290. These regulatory amendments will improve the basic standards for health and safety and will increase the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized.

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

Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

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

There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement

Yes.

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

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

The Department's regulations require operators to secure and store toxics (with the contents listed) such that they are made inaccessible to children and do not contaminate food areas or play surfaces. As well, trash must be removed from the facility at least once a day, and trash shall be removed from the facility grounds at least once per week. Trash that has been contaminated by human secretions or excrement shall be contained in closed, plastic-lined receptacles. And finally,
Department regulations require that when children are diapered, the facility must use disposable diapers, a diaper service, or arrange for a daily diaper supply with the parent. All soiled diapers must be disposed of in accordance with requirements depending on whether the diapers are disposable or not. As well, diaper changing surfaces must be cleaned after each use by wiping it with a sanitizing solution or by changing any surface covering, and such surfaces may not be used for food preparation or food service. Staff must check a child’s diaper at least every two hours and whenever there is indication of a soiled diaper, and staff must change a child’s diaper when the diaper is soiled.

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

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
Yes.

9. Precautions in transporting children (if applicable)
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Department regulations require a facility to notify local traffic authorities as well as parents in writing of its location, the use of pedestrian and vehicular routes around the facility, all pick-up and drop-off points, bike routes, and crossways. All transportation by the facility requires written parental consent, and there shall be written notification of safe routes posted conspicuously by the operator in the facility. When transporting
children, regulations require that specific staff-child ratios be used by the operator to ensure the proper supervision of children, with the driver considered a part of such ratio only when school-age children are being transported. When children are being transported, all safety restraints installed in the vehicle at the time of manufacturing must be used by all occupants, with instructions for their use to be kept in the vehicle at all times. As well, children 7 years of age or younger must be transported pursuant to the PA vehicle code as it relates to requirements for all parents and guardians. Regulations further require that all vehicles used to transport children must be insured; the doors locked when in motion; with no more than three persons in the front seat. There is also a regulatory prohibition against the use of the back of pick-up trucks or the cargo areas of station wagons to transport children; as well as against the use of 11-15 passenger vans. Finally, a first-aid kit that meets Department requirements must be stored in any vehicle with children being transported.

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

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
Yes.

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Pursuant to DHS Announcement C-16-01, training in this topic became required of all
-- List all citations for these requirements, including those for licensed and license-exempt providers
55 Pa. Code 3270.33(d) and Announcement C-16-01 found at http://www.dhs.pa.gov/provider/earlylearning/earlylearningproviderrequirements. As of the submission date of this plan, Pennsylvania has amendments pending for the health and safety regulations at 55 Pa. Code 3270, 3280, and 3290. These regulatory amendments will improve the basic standards for health and safety and will increase the state’s ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized. Department regulations along with the said Announcement require 10 Federal training topics, with one of which being for CPR / First Aid training. Pursuant to the Department's regulations and the said Announcement, the provider must ensure that there is a minimum of one staff person available at all times who has been trained in CPR. Documentation of such training should be maintained by the operator in the staff person's file.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
Relatives, defined as grandparents; great-grandparents; aunts; uncles and siblings of the child, over 18 years of age and not not living in the home, are license-exempt providers and are exempt from this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
Yes.

11. Recognition and reporting of child abuse and neglect
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
DHS regulations require adherence to the CPSL, which requires all mandated
reporters to be trained on an approved curriculum every three years. Approved training is provided on the Keep Kids Safe website. Upon successful completion, participants are provided with a certificate to document compliance with the law. In addition to training requirements, the CPSL codifies the regulatory requirement that employees of child care services who have direct contact with children in the course of employment are mandated reporters; that is, they must make a report of suspected child abuse if the person has reasonable cause to suspect that a child is a victim of child abuse, with reporting procedures codified as well in CPSL, to include submission of a written report within 48 hours.

-- List all citations for these requirements, including those for licensed and license-exempt providers
55 Pa. Code 3270.32(a); also see www.KeepKidsSafe.pa.gov which specifics the approved trainings for mandated reporter training.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
There are no variations. All providers, including license-exempt, must meet this requirement.

-- Describe any variations based on the age of the children in care
There are no variations based on the age of the children in care.

-- Describe if relatives are exempt from this requirement
No.

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

☐ No, if no, skip to 5.2.3.
☒ Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Nutritional appropriately-timed meals and snacks are served to children. Additionally, lunch and breakfast served by the facility require certain food groups be included.

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

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

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

-- Describe if relatives are exempt from this requirement
Yes.

2. Access to physical activity
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Facility is required to provide safe play space to be used for large muscle activity.

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

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

-- Describe any variations based on the age of the children in care.
N/A
3. Caring for children with special needs
--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
The operator shall make reasonable accommodation to include a child with special needs in accordance with applicable Federal and State laws.

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

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

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

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).
Describe:
Child care staff are required to obtain at a minimum, six hours of PD on an annual basis in topics related to child development and health and safety of children.

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Child care staff persons must obtain an annual minimum of six clock hours of child care training.
-- List all citations for these requirements, including those for licensed and license-exempt providers
55 Pa. Code 3270.31(e)

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

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

-- Describe if relatives are exempt from this requirement
Yes.

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

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:
10
2. Licensed FCC homes:
10

3. In-home care:
10

4. Variations for exempt provider settings:
Relative providers are exempt.

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)
90 days

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served
There is no difference, all providers must take the same training.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered
Training is available online as well as face to face. In-person training is available throughout the Commonwealth of Pennsylvania.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

1. Prevention and control of infectious diseases (including immunizations)
   Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
   55 Pa. Code 3270.31, 3280.31, and 3290.31

   Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care
for children unsupervised?

☐ Yes  ☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes  ☑ No

Describe if relatives are exempt from this requirement

Relatives are required to take a three-hour course on Mandated Reporting of Child Abuse and Neglect prior to approval and every five years thereafter.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

☐ Yes  ☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes  ☑ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.
5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☒ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☒ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☒ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☒ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☒ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31
Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings...
5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑️ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑️ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☑️ No

Describe if relatives are exempt from this requirement

Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☐ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
☐ No

Describe if relatives are exempt from this requirement

No, relatives must take a three-hour online course on mandated reporting of child abuse and neglect prior to approval and every five years thereafter.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

☐ Yes
☐ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

☐ Yes
No
Describe if relatives are exempt from this requirement
Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so.

5.2.3e 13.
Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..
On an annual basis, all child care staff are required to obtain a minimum of 6 clock hours of child care training which may include training in these areas.

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
☐ Yes
☒ No

Describe if relatives are exempt from this requirement
Yes, relatives are exempt. Relatives are encouraged to take a variety of trainings but are not required to do so
Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

   a) Licensed child care centers:
      6 hours.

   b) Licensed FCC homes:
      6 hours.

   c) In-home care:
      6 hours.

   d) Variations for exempt provider settings:
      Relative providers are exempt.

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

1. Prevention and control of infectious diseases (including immunizations)
   -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
      55 Pa. Code 3270.31, 3280.31, 3290.31

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
      ☑ Annually
2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
   -- Provide the citation for this training requirement, including citations for both licensed
   and license-exempt providers
   55 Pa. Code 3270.31, 3280.31, 3290.31

   -- How often does the state/territory require that this training topic be completed by
   caregivers, teachers, and directors in licensed CCDF programs?
   ☑️ Annually
   ☐ Other
   Describe:

   -- How often does the state/territory require that this training topic be completed by
   caregivers, teachers, and directors in licensed-exempt CCDF programs?
   ☐ Annually
   ☑️ Other
   Describe:

   N/A for relative providers.

3. Administration of medication, consistent with standards for parental consent
   -- Provide the citation for this training requirement, including citations for both licensed
   and license-exempt providers
55 Pa. Code 3270.31, 3280.31, 3290.31

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- **Annually**
- **Other**

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- **Annually**
- **Other**

Describe:

N/A for relative providers

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

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, 3290.31

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- **Annually**
- **Other**

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

- **Annually**
- **Other**
Describe:
N/A for relative providers.

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic
   -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
   55 Pa. Code 3270.31, 3280.31, 3290.31

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
     ☑ Annually
     ☐ Other
     Describe:

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
     ☐ Annually
     ☑ Other
     Describe:
     N/A for relative providers.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
   -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
   55 Pa. Code 3270.31, 3280.31, 3290.31

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
     ☑ Annually
Other
Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
☐ Annually
☑ Other
Describe:
Pennsylvania does not exempt CCDF programs.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
   -- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
   55 Pa. Code 3270.31, 3280.31, 3290.31

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
     ☑ Annually
     ☐ Other
     Describe:

   -- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
     ☑ Annually
     ☑ Other
     Describe:
     N/A for relative providers.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants
9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
55 Pa. Code 3270.31, 3280.31, 3290.31

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually
☐ Other
Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually
☑ Other
Describe:
N/A for relative providers
10. Pediatric first aid and CPR certification
-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Pennsylvania has amendments pending for the health and safety regulations at 55 Pa. Code 3270, 3280, and 3290. These regulatory amendments will improve the basic standards for health and safety and will increase the state's ability to honor the full intent of the CCDBG reauthorization. A plan amendment will be submitted once the state's regulations are finalized.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually
☑ Other

Describe:

All providers must complete face-to-face pediatric first aid and CPR every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually
☑ Other

Describe:

N/A for relative providers.

11. Recognition and reporting of child abuse and neglect
-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers
-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☐ Annually
☑ Other

Describe:
All providers must complete approved mandated reporter for child abuse and neglect training every five years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

☐ Annually
☑ Other

Describe:
Relative providers must complete three hours of mandated reporting of child abuse and neglect every five years.

12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

55 Pa. Code 3270.31, 3280.31, and 3290.31

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

☑ Annually
☐ Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?
13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc.
On an annual basis, all child care staff are required to obtain a minimum of 6 clock hours of child care training which may include training in these areas.

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers
55 Pa. Code 3270.31, 3280.31 and 3290.31

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

- [x] Annually
- [ ] Other

Describe:

N/A for relative providers.
5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

Pursuant to 55 Pa. Code 3270.14, a facility shall be operated in conformity with applicable federal and state laws and regulations. State agencies whose regulations may relate to the operation of a facility include the Department of Environmental Protection, the Department of Labor and Industry, DOH, PDE, and the Department of Transportation. Inspections for licensed CCDF providers occur annually.

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16(n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.
standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory’s requirements for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards

The Pennsylvania Human Services Code and Chapter 20 of the Title 55 Pennsylvania Regulations provide the authority to conduct a pre-licensure and annual inspection at child care centers, group child care homes, and family child care homes. The inspection assesses compliance with health, safety, and fire standards. Pursuant to Article X of the Human Services Code, all family child care providers, like all other child care providers, must receive pre-service and annual inspections by DHS to maintain a valid certificate of compliance. All such inspections assess compliance with health, safety, and fire standards.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

The Pennsylvania Human Services Code and Chapter 20 of the Title 55 Pennsylvania Regulations provide the authority to conduct a pre-licensure and annual inspection at child care centers, group child care homes, and family child care homes. The inspection assesses compliance with health, safety, and fire standards. The Announcement regarding unannounced inspections is referenced at: http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_084651.pdf

3. Identify the frequency of unannounced inspections:

☐ Once a year
☑ More than once a year

Describe:

In addition to the annual renewal inspection, providers may be selected as part of the annual unannounced inspection initiative. OCDEL selects 10 percent of regulated providers to participate in these inspections.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.
The inspection assesses compliance with health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers
   55 Pa. Code 3270.11 (e)

b) Licensed CCDF family child care home
   1. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards
   Pursuant to Article X of the Human Services Code, all family child care providers, like all other child care providers, must be inspected by DHS prior to receiving a certificate of compliance. Upon submitting an application for a certificate of compliance, family child care providers must provide a Certificate of Occupancy from the Department of Labor & Industry or the local municipality, with such certificate showing the building is in compliance with the Uniform Construction Code (UCC) and is acceptable for use as a family child care home. Proof of mandated reporter training is also required at the time of application. After submitting a complete application package to the Department, an announced pre-licensure inspection will be established. When the provider is ready, the new family child care home will be inspected for compliance with over 25 of the Department's basic health, fire and safety regulations, including but not limited to the emergency plan, toxics, outside walkways, electrical covers, hot water pipes, ventilation, firearms, space heaters, exits, condition of play equipment, pets, and water activity.

   2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers
   Pursuant to Article X of the Human Services Code, all family child care providers, like all other child care providers, must receive annual inspections by DHS to maintain a valid certificate of compliance. All family child care provider facilities are inspected annually, with all such inspections being unannounced. Unlike the initial pre-licensure inspection, providers are responsible and will be evaluated with regard to health, fire and safety and compliance for all child care regulations at 55 Pa. Code 3290, et. seq.
3. Identify the frequency of unannounced inspections:
   - [ ] Once a year
   - [x] More than once a year
   Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

   Pursuant to Article X of the Human Services Code, all family child care providers, like all other child care providers, must receive inspections by the DHS annually to maintain a valid certificate of compliance. All such inspections assess compliance with health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers


c) Licensed in-home CCDF child care

   - [x] N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

   1. Describe your state/territory's requirements for pre-licensure inspections of licensed in-home child care providers for compliance with health, safety, and fire standards

   2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

   3. Identify the frequency of unannounced inspections:
      - [ ] Once a year
      - [ ] More than once a year
      Describe:
4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

OCDEL Bureau of Certification Services.

5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

N/A. All center-based CCDF providers must be licensed.

Provide the citation(s) for this policy or procedure

Article X of the Pennsylvania Human Services Code.

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

N/A. All family child care CCDF providers must be licensed.
Provide the citation(s) for this policy or procedure
Article X of the Pennsylvania Human Services Code.

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used
N/A. CCDF providers who are not related to the children in care and who are providing care in their homes must be licensed. Only providers related to the children in care may provide care in the child's home; related providers are exempt from inspection requirements.

Provide the citation(s) for this policy or procedure
Article X of the Pennsylvania Human Services Code.

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

☐ No
☐ Yes. If yes, describe:

e) List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers
Relatives are exempt from this requirement.

5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(l); 98.42(b)(1-2)).
a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

OCDEL certifies that it has policies and practices to ensure that individuals who are hired as licensing inspectors in Pennsylvania are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the state's licensure requirements.

b) Provide the citation(s) for this policy or procedure

"New Certification Representative Orientation Manual" is one of the tools used to train new licensing staff. This is comprised of a 12-week training period related to health and safety training requirements and all aspects of the state's licensure requirements. All staff have a procedural and protocols manual. In addition, certification representatives are trained at minimum, on an annual basis. Certification representatives received the health and safety basics training. Staff complement was increased so the inspector-to-facility ratio is 1:75. Staff complete mandated reporting training and are required to do so every five years. Licensing staff inspect for compliance with health, safety, and fire standards.

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

Pennsylvania has approximately 7,500 child care providers and 107 licensing representatives. The policy supports a caseload that is sufficient to conduct inspections on a timely basis.
b) Provide the policy citation and state/territory ratio of licensing inspectors
Pennsylvania does not have a specific policy citation that dictates the licensing inspector-to-facility ratio. In 2014, Pennsylvania was chosen by the U.S. Department of Health and Human Services Office of Inspector General (OIG) for a health and safety review of child care facilities. At the time of the audit, the ratio of licensing inspector to facility was 1:143. One of the recommendations of the review was that the state ensure adequate oversight by reducing inspectors' caseloads. Pennsylvania increased the staff complement so the inspector to facility ratio will be between 1:70 and 1:75.

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

- Yes, relatives are exempt from all inspection requirements.
  If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.
  Relative providers must submit child abuse, state police, and FBI clearances. Additionally, relative providers sign an agreement self-certifying the residence does not contain any hazards that pose a threat to the children's health and safety.

- Yes, relatives are exempt from some inspection requirements.
  If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

- No, relatives are not exempt from inspection requirements.
5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks.

<table>
<thead>
<tr>
<th>Components</th>
<th>In-State</th>
<th>National</th>
<th>Inter-State</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Criminal registry or repository using fingerprints in the current state of residency</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Sex offender registry or repository check in the current state of residency</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Child abuse and neglect registry and database check in the current state of residency</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. FBI fingerprint check</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years</td>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is
committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

--The national FBI fingerprint check; and,
--The three in-state background check provisions for the current state of residency:
   --state criminal registry or repository using fingerprints;
   --state sex offender registry or repository check;
   --state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

<table>
<thead>
<tr>
<th>Components</th>
<th>New (Prospective) Staff</th>
<th>Existing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Criminal registry or repository using fingerprints in the current state of residency</td>
<td>Milestone/Prerequisite for Waiver</td>
<td>Possible Time Limited Waiver for current (existing) staff</td>
</tr>
<tr>
<td>2. Sex offender registry or repository check in the current state of residency</td>
<td>Milestone/Prerequisite for Waiver</td>
<td>Possible Time Limited Waiver for current (existing) staff</td>
</tr>
<tr>
<td>3. Child abuse and neglect registry and database check in the current state of residency</td>
<td>Milestone/Prerequisite for Waiver</td>
<td>Possible Time Limited Waiver for current (existing) staff</td>
</tr>
<tr>
<td>4. FBI fingerprint check</td>
<td>Milestone/Prerequisite for Waiver</td>
<td>Possible Time Limited Waiver for current (existing) staff</td>
</tr>
<tr>
<td>5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)</td>
<td>Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff</td>
<td></td>
</tr>
<tr>
<td>6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional</td>
<td>Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff</td>
<td></td>
</tr>
<tr>
<td>7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years</td>
<td>Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff</td>
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</tr>
</tbody>
</table>
Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

### In-state Background Check Requirements

#### 5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Under the Pennsylvania CPSL, all staff are required to submit criminal history background checks to work in child care. 55 Pa. Code 3270.32(a); 55 Pa. Code Chapter 3270, 3280, and 3290 require that child care staff comply with the state's CPSL. All background checks are performed pursuant to the CPSL. The background check process includes a fingerprint-based search of the in-state criminal history repository for licensed child care providers and their staff.
ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.
CCDF providers related to the children in care must comply with criminal history background check requirements as per the state CPSL. All background checks are performed pursuant to the CPSL. The background check process includes a fingerprint-based search of the in-state criminal history repository for license-exempt, relative providers. See 23 Pa. C.S. Chapter 63, specifically §§ 6303 (a) Definitions, 6344 (a)(6) Individuals having access to children and 6344 (b) Information to be submitted.

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

There are no differences

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges

Describe:
5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.
   i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
   All staff are required to submit a criminal history background check to work in child care. The Pennsylvania State Police background check includes a check of the state sex offender registry. 55 Pa. Code 3270.32(a); 55 Pa. Code Chapter 3270, 3280, and 3290 require that child care staff comply with the state’s CPSL. All background checks are performed pursuant to the CPSL.
   
   ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
   CCDF providers related to the children in care must comply with criminal history background check requirements as per the state CPSL. The background check process includes a fingerprint-based search of the in-state criminal history repository for license-exempt, relative providers. See 23 Pa. C.S. Chapter 63, specifically §§ 6303 (a) Definitions, 6344 (a)(6) Individuals having access to children and 6344 (b) Information to be submitted.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?
   ✔ Yes
   Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.
There are no differences.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:
-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges

Describe:

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.
   i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

   All child care staff are required to complete a child abuse history clearance to work in a child care facility. 55 Pa. Code 3270.32(a); 55 Pa. Code Chapter 3270, 3280, and 3290 require that child care staff comply with the state's CPSL. All background checks are performed pursuant to the CPSL.

   ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations
CCDF providers related to the children in care must comply with criminal history background check requirements as per the state CPSL.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

- Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

There are no differences.

- No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State’s criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).
a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

All child care staff are required to submit a FBI fingerprint clearance to work in a child care facility. 55 Pa. Code Chapter 3270, 3280, and 3290 require that child care staff comply with the state’s CPSL. All background checks are performed pursuant to the CPSL. The background check process includes all licensed child care providers and their staff.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

CCDF providers related to the children in care must comply with criminal history background check requirements as per the state CPSL. The background check process includes all license-exempt, relative providers. See 23 Pa. C.S. Chapter 63, specifically §§ 6303 (a) Definitions, 6344 (a)(6) Individuals having access to children and 6344 (b) Information to be submitted.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

☑ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

There are no differences.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible
National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

☐ Yes. If yes,
   i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

   ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
Pennsylvania has met the milestones prerequisites for a time limited waiver. Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that includes the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-based child abuse and neglect registry and database. Pennsylvania has demonstrated a good faith effort to implement background check to include the NCIC's National Sex Offender Registry (NSOR). To support these requirements, Pennsylvania's CPSL must be amended. DHS has established these amendments to the CPSL as a legislative priority. These legislative priorities will be shared with the Pennsylvania General Assembly and it is intended that the changes to the CPSL be included in the state's budget for FY 2019-2020. OCDEL is working to establish procedures to collect applicant information to conduct the NSOR check, as well as develop protocols for the review and release of the results to applicants. Pennsylvania will use increased funding resulting from the 2018 Omnibus to support the enhancement of data transfer, completion of the NSOR review process and to staff the unit needed to review, verify applicant information match, and resolve appeals if need be.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

- [ ] Yes
- [x] No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:
  -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
  -- Efforts to date to complete the requirement for all existing child care staff in other

Pennsylvania
programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges
Describe:
Pennsylvania has demonstrated a good faith effort to implement background check to include the NCIC's National Sex Offender Registry (NSOR). To support these requirements, Pennsylvania's CPSL must be amended. DHS has established these amendments to the CPSL as a legislative priority. These legislative priorities will be shared with the Pennsylvania General Assembly and it is intended that the changes to the CPSL be included in the state’s budget for FY 2019-2020. OCDEL is working to establish procedures to collect applicant information to conduct the NSOR check, as well as develop protocols for the review and release of the results to applicants. Pennsylvania will use increased funding resulting from the 2018 Omnibus to support the enhancement of data transfer, completion of the NSOR review process and to staff the unit needed to review, verify applicant information match, and resolve appeals if need be.

**Inter-state Background Check Requirements**

Checking a potential employee’s history in any state other than that in which the provider’s services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to
the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the
two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new
(prospective) child care staff?

☐ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed,
regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and
98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other
providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible
providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide

citations

☑ No. (Waiver request allowed. See Appendix A). Describe the status of
conducting the the interstate criminal registry or repository check for new
(prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed,
regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other
programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Pennsylvania has met the milestones prerequisites for a time limited waiver.
Pennsylvania requires the following background checks: The National FBI fingerprint
check and the state background check that include the state criminal registry or
repository using fingerprints, state sex offender registry or repository check and the state-
based child abuse and neglect registry and database. Pennsylvania has demonstrated a
good faith effort to implement the background check requirement for a search of the state
criminal registry in any state the staff member resided in during the preceding 5 years. In
the interim, Pennsylvania will establish policies and procedures to require this
background check for all child care staff. Additionally, the CPSL must be amended.
These legislative priorities will be shared with the Pennsylvania General Assembly and it
is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges

Describe:

Pennsylvania has met the milestones prerequisites for a time limited waiver. Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that include the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-based child abuse and neglect registry and database. Pennsylvania has demonstrated a good faith effort to implement the background check requirement for a search of the state criminal registry in any state the staff member resided in during the preceding 5 years. In the interim, Pennsylvania will establish policies and procedures to require this background check for all child care staff. Additionally, the CPSL must be amended. These legislative priorities will be shared with the Pennsylvania General Assembly and it is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.
5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

☐ Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges

Describe:

Pennsylvania has met the milestones prerequisites for a time limited waiver.
Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that includes the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-
based child abuse and neglect registry and database. Pennsylvania has demonstrated a good faith effort to implement the background check requirement for a search of the state sex offender registry in any state the staff member resided in during the preceding 5 years. The CPSL must be amended and DHS has established these amendments to the CPSL as a legislative priority. It is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

☐ Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☒ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
-- Key challenges to fully implementing this requirements
-- Strategies used to address these challenges

Describe:
Pennsylvania has met the milestones prerequisites for a time limited waiver. Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that includes the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-based child abuse and neglect registry and database. Pennsylvania has demonstrated a good faith effort to implement the background check requirement for a search of the state sex offender registry in any state the staff member resided in during the preceding 5 years. The CPSL must be amended and DHS has established these amendments to the CPSL as a legislative priority. It is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.
5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

☐ Yes. If yes,
   i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

   ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

   -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
   -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
   -- Key challenges to fully implementing this requirements
   -- Strategies used to address these challenges

Describe:

Pennsylvania has met the milestones prerequisites for a time limited waiver. Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that includes the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-based child abuse and neglect registry and database. Pennsylvania has demonstrated a
good faith effort to implement the background check requirement for a search of the state sex offender registry in any state the staff member resided in during the preceding 5 years. The CPSL must be amended and DHS has established these amendments to the CPSL as a legislative priority. It is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

☐ Yes
   Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☑ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:
   -- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
   -- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
   -- Key challenges to fully implementing this requirements
   -- Strategies used to address these challenges

Describe:
Pennsylvania has met the milestones prerequisites for a time limited waiver.
Pennsylvania requires the following background checks: The National FBI fingerprint check and the state background check that includes the state criminal registry or repository using fingerprints, state sex offender registry or repository check and the state-based child abuse and neglect registry and database. Pennsylvania has demonstrated a good faith effort to implement the background check requirement for a search of the state sex offender registry in any state the staff member resided in during the preceding 5 years. The CPSL must be amended and DHS has established these amendments to the CPSL as a legislative priority. It is intended that the changes to the CPSL be included in the state's budget for fiscal year 2019-2020.
Provisional Employment

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Describe and include a citation:

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).
Describe and include a citation:
Prospective staff members may begin work on a provisional basis if supervised at all times while awaiting receipt of clearances. Currently staff may begin to work if verification that the FBI or state fingerprint check has been applied for. As of the submission date of this plan, Pennsylvania has amendments pending for the health and safety regulations at 55 Pa. Code 3270, 3280, and 3290. These regulatory amendments will improve the basic standards for health and safety and will increase the state's ability to honor the full intent of the CCDBG re-authorization. A plan amendment will be submitted when the state's regulations are finalized.

Other.
Describe:

5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).
Pennsylvania requires the Child Abuse History Clearance be completed within 14 days of receipt of the request for the check. The Pennsylvania Child Abuse History Clearance can be submitted and paid for online or through the mail. If submitted online, applicants can view and print the results online. The Pennsylvania State Police criminal clearance can be requested online and the results are provided within minutes if the individual does not have a criminal record. If there is a criminal record, the information is generally returned to the applicant within 30 days. The FBI fingerprinting clearance is conducted by electronically scanning the fingerprints into a nationwide data search base. Results returned to the applicant in 14 days.
5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review (at the state/territory’s option) - a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

☐ No
☑ Yes.

Describe other disqualifying crimes and provide citation:

Prohibitions are outlined in the state's CPSL. The CPSL prohibits a person who meets any of the following from operating or working in a child care facility: Named as perpetrator of a founded report of child abuse within the past five years Convictions of any of the following crimes or the attempt, solicitation or conspiracy to commit any of the following crimes under Title 18 of the Pennsylvania Consolidated Statutes or equivalent crimes in another state or under federal law: Chapter 25 (relating to criminal homicide) Section 2702 (relating to aggravated assault) Section 2901 (relating to kidnapping) Section 2902 (relating to unlawful restraint) Section 3121 (relating to rape) Section 3122.1 (relating to statutory sexual assault) Section 3123 (relating to
involuntary deviate sexual intercourse) Section 3124.1 (relating to sexual assault) Section 3125 (relating to aggravated indecent assault) Section 3126 (relating to indecent assault) Section 3127 (relating to indecent exposure) Section 4302 (relating to incest) Section 4303 (relating to concealing death of child) Section 4304 (relating to endangering welfare of children) Section 4305 (relating to dealing in infant children) Section 5902(b) Felony (relating to prostitution and related offenses) Section 5903(c)(d) (relating to obscene and other sexual material and performances) Section 6301 (relating to corruption of minors) Section 6312 (relating to sexual abuse of children) Felony offense under Act 64-1972 (relating to the controlled substance, drug devise and cosmetic act) committed within the past five years.

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

OCDEL is not the lead agency conducting background clearances. Childline and PSP follow CJIS confidentiality guidelines for the protection and release of personally identifiable information. All results for all criminal background reports can be appealed to the issuing authority - the PSP, the FBI, or ChildLine - to challenge accuracy or completeness of the report. If the Department issues a citation or it denies, refuses to renew, or revokes a certificate of compliance based on the results of background checks, the applicant or legal entity has the right to appeal that decision through the DHS administrative appeal procedure to the Bureau of Hearings and Appeals. The Department ensures the privacy of criminal background reports through regulation - see 55 Pa. Code 3270.193. Per regulation, all facility persons’ records are considered confidential, and they must be stored in a locked cabinet; and further, a facility person may not disclose information about another facility person except in the course of investigation or inspection. In addition, the only individuals who can access the criminal
background reports are either the applicant or the provider via written consent from the applicant. The Department has a review process for reconsideration of disqualification results on criminal background reports, which includes for felony drug offenses, and they are processed and reviewed by the Department. By way of further appeal opportunity, the Department's determination can then be appealed by the individual to the Bureau of Hearings and Appeals. Meanwhile, Pennsylvania's Child Protective Services Law mandates disqualification for felony drug offenses committed within the last five years, and adherence to the CPSL is required pursuant to the Department's child care regulations. See 23 Pa. C.S. 6344 and 55 Pa. Code 3270.32, 3270.32 and 3290.32.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). Pennsylvania charges fees only to cover the cost of processing clearances.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- [x] No, relatives are not exempt from background check requirements.
- [ ] Yes, relatives are exempt from all background check requirements.
- [ ] Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements,
describe which background check requirements do not apply to relative providers.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.
a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

OCDEL sets the policies for the early childhood workforce system's PD. In consultation with OCDEL, the PA Key is responsible for developing, updating, and distributing the CKCs. The CKCs are an essential component of Pennsylvania's PD system. They identify a set of content areas which help define the knowledge expectations for professionals in early childhood and school-age settings. The CKCs supports students' preparation for entry into the field of early childhood and school-age care as well as professionals' commitment to lifelong learning through ongoing professional growth. The current CKCs were released in July 2014 and include the following Knowledge Areas: Child Growth and Development Curriculum and Learning Experiences Families, Schools and Community Collaboration and Partnerships Assessment Communication Professionalism and Leadership Health, Safety and Nutrition Program Organization and Administration All training included in Pennsylvania's PD Registry must be aligned to the CKCs. The CKCs support, align with, and complement the following documents: PA Learning Standards for Early Childhood; PA Academic Standards; PA Child Care Regulations; PA Chapter 49-2 Standards for the Teaching Profession; Keystone STARS Standards; Head Start Performance Standards; NAEYC Teach Preparation Standards; CDA Competency Goals and Functional Areas; and the Council for Exceptional Children, Division of Early Childhood.

-- Career pathways. Describe:

The goal of Pennsylvania's ECE Career Pathways System is to ensure children in Pennsylvania are educated by professionals who have achieved professional learning through the attainment of foundational and specialized knowledge pertinent to the care and education of young children. This system of professional learning is ongoing, intentional, reflective, goal-oriented, based on specific curricula, and is consistent across the state. The ECE Career Pathways represents Pennsylvania's career pathway vision for the early learning workforce; it is not meant to depict the current minimal qualifications for associated career roles defined through regulation. The ECE Career Pathways serves as a guide to the education levels required for classroom level positions in the early learning and school-age field, as well as a framework for career planning, as well as a guide to cross-systems planning with IHEs, workforce investment, and labor and industry
representatives. The current ECE Career Pathways framework was developed by a cross-sector group which included statewide representatives from higher education, PD organizations, child care, HS, EI, OCDEL's regional quality partners, advocates, PDE, OCDEL, and PA Key. The ECE Career Pathways encompasses individual attainment from high school diploma, or equivalency, through terminal degrees with the goal of guiding the workforce to credit bearing degree attainment through accredited IHEs. The ECE Career Pathways defines educational qualifications and professional experience required at each level. To meet PD standards specified in child care certification and Keystone STARS individuals working in child care centers, group child care homes, or family child care homes must meet specific degree attainment requirements which increase with each higher STAR level. Pennsylvania continues to update the ECE Career Pathways with input from stakeholders and emerging research. An on-going Career Pathways Steering Committee meets regularly to ensure cross-systems alignment as well as alignment with provider movement through the Keystone STARS system.

--- Advisory structure. Describe:
Recommendations for the development, revision and implementation of the PD system are provided on an ongoing basis by a group of ELRCs and PD organization representatives who meet several times a year with the Professional Development Project Manager at the PA Key. In addition, the PD Registry department has developed a governance structure to discuss, develop, and troubleshoot PD Registry system enhancements and capabilities. The Steering Committee is comprised of OCDEL leadership and PA Key staff. The PD Registry Stakeholder Committee is comprised of family home providers, center-based directors, ECMH consultants, PD organization staff, ERLC staff, instructors, OCDEL staff, and IHE representatives. The committee meets four times a year.

--- Articulation. Describe:
Pennsylvania is committed to supporting seamless articulation of credit for ECE professionals engaged in the higher education system. In 2018, there were 56 early childhood program-to-program articulation agreements between two and four-year IHEs in Pennsylvania. All 14 State IHE and all 14 Community Colleges in the commonwealth have program-to-program articulation agreements in early childhood education. Several private and academic baccalaureate institutions have also signed early childhood education program-to-program articulation agreements with two-year institutions, and
many more institutions are working on developing early childhood education articulation agreements. These seamless articulation agreements between two and four-year IHE allow practitioners, upon successful completion of the associate degree program in early childhood education, to transfer between 54 and 60 academic credits to a baccalaureate Pre-K to Grade 4 degree program. OCDEL will continue working with the Transfer and Articulation Oversight Committee (TAOC) to assess the effectiveness of these agreements for students in early childhood education programs.

-- Workforce information. Describe:
Pennsylvania continues to enhance the collection of PD, instructor information, and workforce data through a PD Registry system. The current iteration of Pennsylvania's PD Registry is a learning management system that includes PD opportunities offered by instructors approved through the Pennsylvania Quality Assurance System (PQAS). Individuals register for a PD event and, after verification of participation, information is entered into a personal PD learning record. Online evaluation of PD events is available. The PD registry contains a listing of over 2,000 approved PQAS instructors. Instructor approval is aligned with the CKC areas. Only approved instructors are permitted to post PD events to the PD registry. OCDEL strongly encourages all ECE workforce members to participate in the PD Registry. Unlike other registries targeting early learning educators, this registry is not restricted to individuals participating in a particular initiative, but rather is accessible to anyone and includes persons from across sectors. Current data elements of the PD registry are aligned with the National Registry Alliance best practices. Data is self-reported and verifiable. Employment is verified by administrators and education is verified through OCDEL business partners. This system allows Pennsylvania to apply for Participant Eligibility Review (PER) compliance through the National Registry Alliance.

-- Financing. Describe:
Pennsylvania's Rising STARS Tuition Assistance Program and T.E.A.C.H. (Teach Education and Compensation Helps) support eligible applicants enrolling in credit-bearing courses in order to attain credentials or post-secondary degrees in early childhood education. Funding is available to current ECE professionals employed in certified child care programs who meet salary guidelines. The CDA Assessment Fee Voucher Program, available to individuals working at Keystone STARS facilities, supplies payment of the CDA Assessment fee directly to the Council for Professional Recognition.
on behalf of the approved student. Higher level STARS programs are encouraged to invest their tiered reimbursement dollars in supporting higher wages and tuition assistance program support for their staff working to attain degrees.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:
Each of the following types of PD are recognized by child care certification and Keystone STARS. Content must be related to the early childhood or school-age field, as outlined in the CKCs: College credit offered through an accredited IHE. Act 48/Act 45 PD which has been approved as acceptable for Act 48/45 hours through PDE. CEUs approved through a recognized professional association, college/university, or other specialty organization. PQAS hours offered by approved PD Instructors or Technical Assistant Consultants.

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:
Pennsylvania is committed to ensuring PD and higher education opportunities align with the CKCs. This support includes financial and technical assistance resources provided by OCDEL and its business partners, including the PA Key. The alignment processes included crosswalking course syllabi to the CKCs including objectives, assignments and assessments. There is a particular focus on strengthening the capacity of early childhood professionals working with infants and toddlers to support children's development and learning through high quality, developmentally, culturally, linguistically, and ability appropriate instruction that is child-centered, inclusive, family-focused, and built on the foundation of the CKCs.

- Other

Describe:
6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

ELC focuses on early education, birth through age 8, and developing a comprehensive, high quality birth to age 8 continuum of services with alignment and transition into K-12. Ad hoc workgroups are formed to address areas of emerging need or interest including PD and cross-systems alignment. Recent groups related to PD include a group focusing on the role of technology in professional development, including access and familiarity issues, and another group focusing on a comprehensive infant/toddler strategy. The ELC continues to be a cross-systems resource when addressing statewide professional development challenges and opportunities.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

Pennsylvania is committed to supporting and improving the quality, stability, diversity, and retention of ECE caregivers, teachers, and directors through providing meaningful and appropriate professional development with an emphasis on ECE degree attainment. In order to address both address quality and retention of qualified teachers, caregivers and directors Pennsylvania’s Rising STARS Tuition Assistance Program and T.E.A.C.H. support eligible applicants enrolling in college-credit bearing courses to attain credentials or post-secondary degrees in early childhood education. Funding is available to current ECE professionals, teachers, caregivers and directors, employed in certified child care programs who meet salary guidelines to further their education specifically in ECE to ensure qualified staff are offering children high-quality experiences. Additionally, the CDA Assessment Fee Voucher Program, available to individuals working at Keystone STARS facilities, supplies payment of the CDA assessment fee directly to the Council for Professional Recognition on behalf of the approved student. Higher-level STARS programs are encouraged to invest their tiered reimbursement dollars in supporting higher wages and tuition assistance program support for their staff working to attain degrees and then incentivize them to stay at their program after
their degree attainment. Depending on the percentage of at-risk children served, individual teachers at STAR 2, 3, and 4 child care programs may be eligible for Education and Retention Awards (ERAs) on an annual basis to both improve stability and retention of qualified staff. ERAs are available to teachers who have attained certain specified credentials or degrees and have worked a minimum number of hours in the program over the past year. The amount of the ERA increases across STAR levels and across Career Pathways levels. The OCDEL and PA Key Career Resource Guide for Early Learning and School-Age Professionals includes information about PA’s Students Occupationally and Academically Ready (SOAR) program, which allows Career and Technical Education (CTE) students to earn free college credits. Students who are confirmed as completing their entire CTE program and who score well on a program approved test are awarded these credits. Additional information is available at http://www.collegetransfer.net/Search/PABureauofCTESOARPrograms/tabid/3381/Default.aspx

STAR 2 programs serving a minimum percentage of at-risk children may be eligible for Merit Awards on an annual basis. Those programs serving high percentages of at-risk children may often also have a more diverse workforce. Making these funds available to those programs aids us in supporting diversity in the ECE workforce. Programs may choose to use Merit Award funds to supplement staff benefits, including the introduction of benefits such as paid sick leave, paid annual leave, health care benefits, and/or retirement benefits. With the exception of health care benefits, providers must work towards moving the cost of maintaining benefits into the provider’s regular operating budget. Sick leave policies are incentivized in the STAR 3 and 4 points section of the Keystone STARS performance standards to encourage provider implementation. Pennsylvania’s CKCs include items focused on the well-being of the provider as well as the development of the young child. Relevant competency statements are found in the Assessment; Professionalism and Leadership; and Health, Safety and Nutrition Knowledge Areas. Examples of professional development sessions available to providers through the Professional Development Registry include: Resilient Caregivers: Bouncing Back from Stress; Distress Tolerance: Skills and Expectations; Working with Families and Children during Stressful Times; Nurturing Early Childhood and School-age Professional Dispositions: Strategies for Directors and Reflective Supervision. These sessions represent multiple competency levels and multiple formats (face-to-face; online synchronous, online asynchronous).
6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

Review of all PD content uses a rubric to ensure CKC’s are aligned with the PD objectives. PD on the Learning Standards for Early Childhood is available to all providers through the PD Registry. At a STAR 2 all staff at must complete PD on the learning standards and use them as a resource to support the planning and documentation of children’s learning. At the highest quality levels, the standards are aligned with the program’s curriculum. To operate a child care facility in Pennsylvania, including first time operators or opening an additional or new location, the potential operator must attend an orientation training session within 12 months prior to opening a program. Orientation sessions, which are held on an ongoing basis across the state, focus on the state’s health and safety standards. Additional PD on health and safety topics are available to all providers through the PD Registry. Some PD organizations fund a three-college credit child care health advocate course, which provides early childhood staff with the skills and knowledge to work with their programs to ensure that best practices in health, safety, and nutrition are embedded in daily operations. PD on social-emotional behavior intervention models is available through the PD Registry. Pennsylvania supports facilities interested in implementing developmental screening within
45 days of program entry (STAR 2, 3, and 4) and PW-PBIS through PD in the use of developmental screening tools, like the ASQ:SE kit at no cost to programs, and technical assistance in implementing PW-PBIS. Pennsylvania also offers PD on trauma informed practice through the PD Registry.

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

N/A

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

a) with limited English proficiency
Pennsylvania provides translated materials for child care providers through the ELRCs to both recruit and encourage participation in the subsidy system of providers with limited English proficiency. In addition, quality improvement resources are offered to providers participating in Keystone STARS to support their quality building activities (including bilingual program quality assessors and quality coaches). Through the ELRCs, all child care providers regardless of type, age or capability are actively engaged and encouraged to participate in both the subsidy program as well as professional development offerings to offer responsive and appropriate care for all children. Continued effort will be made to add additional languages and resources to the quality system.

b) who have disabilities
Through the ELRCs, all child care providers regardless of type, age or capability are actively engaged and encouraged to participate in both the subsidy program as well as professional development offerings to offer responsive and appropriate care for all children. Child care
providers are required to maintain facilities that are compliant with DHS child care regulations and that have certificates of occupancy under the Uniform Construction Code and that are compliant with all requirements of the Americans with Disabilities Act. As part of the child care certification process all providers must complete a Civil Rights questionnaire where they attest to having current Equal Employment Opportunity and Nondiscrimination in Services policy statements as part of their hiring practices and must provide information to staff and enrolled families as to how to make a complaint. ELRC agencies must also adhere to the Title VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, and/or the Pennsylvania Human Relations Act of 1955, as amended with the PHRC or Equal Employment Opportunity Commission (EEOC).

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

Keystone STARS standards require that each staff member at facilities that are rated STAR 2 and higher develop an annual PD plan based on needs identified in the Big Ideas and Individual PD Plan. This online self-assessment tool allows individuals to choose areas of greatest interest to them to be highlighted in their annual plan. The PD Registry system offers a drop-down box for instructors entering courses and events allowing them to indicate whether the content is culturally responsive in nature as well as indicating the age level of which the content is intended (infant, toddler, pre-k, school-age, adult). ECE staff are encouraged to select PD that is relevant to the children they serve and the needs of their families. PD is available on a wide variety of topics and modalities, including self-learning modules, webinars, online and face-to-face college courses, conferences, and stand-alone training events. Increased numbers of both face-to-face and on-line professional development events are available in Spanish. Pennsylvania has adopted the WIDA Early English Language Development Standards which directly align with the Pennsylvania’s Learning Standards for Early Childhood for children ages 2½ and 5½ and fit as a companion to Pennsylvania’s previously adopted K-12 WIDA standards. These standards
provide early learning programs support to better serve DLL populations within their settings and PD is offered through the PD Registry which covers a range of topics including: Dual Language Learners and their Families, WIDA Early English Language Development Standards Framework, Dual Language Learners with Disabilities, Scaffolding Language Learning, and Promising Practices. These PD opportunities meet the expressed needs of our ECE providers and encourage providers to strengthen their current practice when serving children and their families in a culturally and linguistically appropriate way.

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a) Describe the state/territory’s training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).
Pennsylvania released policy guidance setting new standards for interagency collaboration at state and local levels to identify young children experiencing homelessness and ensure access to quality early learning programs. A webinar focusing on this announcement and offering information about available resources is posted on the PA Key and EITA websites. A two-page informational document titled "Caring for Young Children Who Are Experiencing Homelessness" is also posted on the PA Key website at www.pakeys.org.

b) Describe the state/territory’s training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).
OCDEL, in partnership with the PA Key and EITA, has developed PD on connecting EI to infants, toddlers, and preschoolers who are experiencing homelessness. The topics include: resources for administrators, staff, and families, accessing programs through OCDEL, overview/discussion on child developmental milestones, basics of early intervention, the impact of homelessness on child development, and an overview of the ASQ.
6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

OCDEL utilizes the ELRC, monitors the sub-ELRC's alerts associated with the newly revised policies or procedures to ensure timely processing. OCDEL also monitors the ELRC business processes by reviewing reports and researching cases on a sporadic basis. In some instances, follow-up sessions are scheduled when issues are identified as recurring for a specific ELRC.

- Other

Describe:

OCDEL also provides a variety of job aids, work flows, and question and answer documents to be used by the ELRC when training new staff or existing staff faces challenges regarding the revised policies or procedures. In addition to the pre-developed materials, OCDEL has established a protocol by which the ELRCs may submit questions regarding specific circumstances that require additional clarification. The protocol for submitting questions for additional clarification is streamlined to provide timely and thorough responses. Questions are answered directly by OCDEL's subject matter specialist, based upon the topic to which the question is related. Telephone or in-person conferences are held, as needed, for very complex circumstances or if multiple lead agencies are vested in the final resolution.
6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory’s strategies to strengthen provider’s business practices, which can include training and/or TA efforts.

a) Describe the strategies that the state/territory is developing and implementing for training and TA.
 Training and PD aligned to CKC Knowledge Area 8, Program Organization and Administration, relates to business practices: "Early childhood and school-age professionals demonstrate knowledge of accepted business practices, legal and regulatory requirements, financial obligations, and record keeping while engaging in ongoing continuous quality improvement practices." All individuals delivering PQAS approved PD and technical assistance must submit evidence of expertise in the Competency Groups in which they are seeking approval. In the case of business practices, many of the approved instructors and consultants are individuals with backgrounds in human resources, employment law, and accounting. PD opportunities are available to all early learning practitioners in Pennsylvania. At the STAR 3 and 4 levels, a member of a program's leadership team is incentivized to be enrolled in or have earned a PA Director Credential or approved equivalent. Director Credential programs, delivered by accredited IHEs, include a three credit course on business practices. Pennsylvania supports the shared services concept, particularly as such services strengthen the business practices of small programs, and consideration of shared services models is reflected in the Keystone STARS performance standards as well as supported through outside funding opportunities to seed innovation.

b) Check the topics addressed in the state/territory’s strategies. Check all that apply.

- [x] Fiscal management
- [x] Budgeting
- [x] Recordkeeping
- [x] Hiring, developing, and retaining qualified staff
- [x] Risk management
Community relationships
Marketing and public relations
Parent-provider communications, including who delivers the training, education, and/or technical assistance
Other

Describe:

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

Pennsylvania's Learning Standards for Early Childhood are research-based according to age and development, and form the foundation for curriculum, assessment, instruction and intervention within early care and education programs. Due to changes in Pennsylvania's third grade academic standards, current research, and the incorporation of the PA Core Standards, revisions to the Pennsylvania Pre-Kindergarten Learning Standards for Early Childhood were completed in the summer of 2013, prior to the Race to the Top-Early Learning Challenge grant award. These revisions to the Pre-Kindergarten Learning Standards for Early Childhood served as the impetus to revise the
Infant/Toddler Learning Standards for Early Childhood to assure continued robust standards alignment. In order to support a culturally and linguistically appropriate resource, a diverse stakeholder group of infant and toddler experts convened and completed revisions to the Infant/Toddler Learning Standards for Early Childhood culminating February 28, 2014. Highlights to the 2014 Infant/Toddler and Pre-Kindergarten revisions include: Incorporation of the Pennsylvania Core Standards in English Language Arts and Mathematics; Early Learning Partnerships Standards are a result of a crosswalk of the Head Start Parent, Family and Community Engagement Framework, PTA National Standards for Family-School Partnerships® and finally, to address the cultural and linguistic relevance, the Strengthening Families Protective Factors Framework™; Addition of Science, Technology, Engineering and Math (STEM) Supportive Practices (strategies used by adults to foster opportunities for student skill development); and Intentional use of language for all audience types (center and home based child care, early intervention, home visiting, Pennsylvania Pre-K Counts, and Head Start). The Infant/Toddler and Pre-Kindergarten Learning Standards for Early Childhood draft documents were available for public comment beginning on May 1, 2014 and ended on May 15, 2014 (15 calendar days). Feedback from the field included representation from the following audience types: higher education; United Way; American Academy of Pediatrics; Commonwealth Libraries; EI; ELC representation (governor-appointed positions); and child care. Feedback on the Early Learning Partnership Standards was received from family experts, EI, and a representative of Center for Schools and Communities. Additional feedback on Approaches to Learning through Play and Social and Emotional Development Standards (Infant/Toddler, Pre-Kindergarten, Kindergarten, and Grades 1 and 2) was provided by national experts, supported through National Governors Association funding. Final refinements were made to the Infant/Toddler and Pre-Kindergarten Learning Standards for Early Childhood based on all feedback received. Initial feedback from the field indicates strong support for the inclusion of STEM supportive practices. Additional feedback on revised standards were provided by Pennsylvania Migrant Education representatives. The 2009 Infant, Toddler and Pre-Kindergarten and the 2007 Kindergarten, Grades 1 and 2 Standards were revised to reflect current research-based content and integration, and to align with the Pennsylvania Core Standards. The 2014 Pre-Kindergarten and 2016 Kindergarten, Grade 1 and Grade 2 standards mirror the standards found on the Standards Aligned System (SAS) in the learning domains of English Language Arts, Mathematics, Science (including Environment and Ecology), Social Studies, and Social and Emotional Development.
Development. Refinements also have been made to: Partnerships for Learning (Family Engagement); Approaches to Learning Through Play; Creative Thinking and Expression; and Health, Wellness and Physical Development.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

Pennsylvania's Learning Standards for Early Childhood are age specific (Infant/Toddler, Pre-Kindergarten, Kindergarten, 1st, 2nd, and 3rd grade) and were revised in 2014 (Infant/Toddler and Pre-kindergarten) and in 2016 (Kindergarten). The standards are intentionally developed and aligned to support the continuum from birth to 3rd grade. Within all Pennsylvania Learning Standards for Early Childhood, the Key Learning Areas define the domains or areas of children's learning that assure a holistic approach to instruction, including culturally and linguistically appropriate resources and supports. All children, regardless of age and ability, should be exposed to experiences that build their skill development in approaches to learning, social and emotional development, language and literacy development, health wellness and physical development, creative expression, and the cognitive areas of mathematics, science, and social studies. The standards within each Key Learning Area provide the information that children should know and the skills children should be able to do when they leave the age level or grade. Pennsylvania Learning Standards for Early Childhood are connected through a continuum of learning and link to the 3rd grade academic standards. Some skills will not emerge in a noticeable way until a child is older. These standards will be intentionally blank or identified as emerging. Professionals who view children's skill development across ages and grades will be able to understand the sequential way children learn and become familiar with the way in which teachers at higher grade levels support learning.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- ✔ Cognition, including language arts and mathematics
- ✔ Social development
- ✔ Emotional development
- ✔ Physical development
- ✔ Approaches toward learning
d) Describe how the state/territory’s early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

Pennsylvania’s Learning Standards for Early Childhood were developed as a joint project of PDE’s Office of Elementary and Secondary Education and OCDEL. Each set of standards has been formulated with help and guidance from practitioners and program specialists who represented early childhood programs, school districts, higher education, family leaders, policy analysts, and researchers. Professional development around the Learning Standards is offered to ensure the learning standards are used in a culturally and linguistically appropriate by providers. A group of Pennsylvania educators, in conjunction with OCDEL, created a set of Pennsylvania Core Standards beginning with Pre-Kindergarten. The Pennsylvania Core Standards start in Pre-Kindergarten and continue through 12th grade. The Pennsylvania State Board of Education adopted the Pennsylvania Core Standards in March 2014. The 2014 revisions include updates related to the Pennsylvania Core Standards; Science, Technology, Engineering, and Math (STEM) supportive practices; and current research trends.

e) Describe how the state/territory’s early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

Pennsylvania’s Learning Standards for Early Childhood were revised in 2014 to connect directly to the 3rd - 12th grade Standards and Standards Aligned System. Additionally, the revised Standards include an emphasis on the play experiences young children should experience as they learn and develop skills, along with important cognitive processes young learners are acquiring to support their understanding of concepts. Standards, concepts, and competencies are all included in the Learning Standards for Early Childhood, along with Essential Questions and Big Ideas that are part of the Standards Aligned System. The Learning Standards documents include Standards, Standard Statements, Concepts and Competencies, and Supportive Practices.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards
Pennsylvania supports out of school time providers serving children up to 13 years old through the Keystone STARS program. The School Age Child Care (SACC) work group was involved in the Keystone STARS revisioning work and has made several recommendations to support OST providers in their CQI activities. OST may use the After School Quality framework to demonstrate a commitment to CQI within the Keystone STARS system. The SACC group continues to be an important stakeholder voice through further revisions of Keystone STARS and implementation conversations with the ELRCs. During periods of improvement and revision of state out-of-school time standards and frameworks, a review of the linguistic and cultural appropriateness is revisited as well.

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

-- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

-- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,

-- Will be used as the primary or sole method for assessing program effectiveness,

-- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.
Pennsylvania’s Learning Standards for Early Childhood form the foundation for curriculum, assessment, instruction, and intervention within ECE programs. Keystone STARS Coaching/TA is available to all child care programs participating in Pennsylvania’s QRIS with
priority given to programs based on level of need and percentage of at-risk children served. The goals of each STARS TA Service Plan are determined by the program and the individual TA Consultant, and may include goals related to increasing and/or enhancing the use of the Learning Standards for Early Childhood in the development of learning activities. OCDEL-funded early learning programs, including PA Pre-K Counts, Keystone STARS, HSSAP, and EHS-CCP, are required to utilize Pennsylvania's Learning Standards for Early Childhood as the framework for lesson planning. As stated in Chapter 4 of the School Code, school-based early childhood programs should also be developing standards-based curricula.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).

2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).

3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

-- Supporting the training and professional development of the child care workforce
-- Improving on the development or implementation of early learning and developmental guidelines

-- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services

-- Improving the supply and quality of child care programs and services for infants and toddlers

-- Establishing or expanding a statewide system of child care resource and referral services

-- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

-- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children

-- Supporting providers in the voluntary pursuit of accreditation

-- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

-- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services
7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory’s needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

Pennsylvania is committed to systems-level CQI and a rigorous five year evaluation cycle of the Keystone STARS system. The evaluation cycle began in 2015 with the release of “An Inquiry of Pennsylvania’s Keystone STARS” found at http://www.cpre.org/STARS. Keystone STARS underwent an 18-month revisioning process culminating in new STARS Performance Standards and a revised system of supports. The revisioning process was documented in a process evaluation with a formative evaluation for the following two years. The final year will see a STAR level validation study intended to drive the next five-year evaluation cycle.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

The Inquiry into the STARS system identified three key findings: Too many standards unrelated to child outcomes. System-level program administrators and child care providers both expressed a belief that Keystone STARS currently has too many requirements and that many requirements are not directly related to improved child outcomes. They indicated that there are system requirements that divert attention and resources away from the primary goal of preparing children for school. Requirements are overly prescriptive. Motivating and incentivizing providers to remain engaged in a quality improvement process has been a challenge for STARS program administrators. Providers, for their part, view the system largely as one of compliance. Inconsistent progression of expectations across STAR levels. Although Keystone STARS was intended to be a roadmap to quality, some providers experience the transition between levels as disjointed and feel stuck at their current level of quality. The STARS revisioning process sought to address these three key findings through a revision of performance standards and indicators and a revision of the system of supports.
7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

- Supporting the training and professional development of the child care workforce. If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.
  - [ ] CCDF funds
  - [ ] Other funds
  Describe:

- Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.
  - [ ] CCDF funds
  - [ ] Other funds
  Describe:

- Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.
  - [ ] CCDF funds
  - [ ] Other funds
  Describe:

- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply
  - [ ] CCDF funds
  - [ ] Other funds
  Describe:
Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

☑ CCDF funds
☐ Other funds
Describe:

Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds
Describe:

☑ Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

☑ CCDF funds
☐ Other funds
Describe:

☑ Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

☑ CCDF funds
☐ Other funds
Describe:

☑ Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

☑ CCDF funds
☐ Other funds
Describe:
Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds
Describe:
Anticipate funds through Pennsylvania's Department of Education to continue the support of the Kindergarten Entry Inventory database.

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

☑ Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:
Training and professional development aligned to CKC Knowledge Areas 1 and 2 relate to the above topics. Knowledge Area 1 - Child Growth and Development:
Professionals must understand the inter-dependence of each key area of learning and how to provide meaningful and relevant experiences for children that are developmentally appropriate, individualized to accommodate each child's needs and
interests, and be respectful of the families' diverse values and cultures. Knowledge Area 2 - Curriculum and Learning Experiences: Early childhood and school-age professionals must utilize their knowledge of child development and each child's individual needs and interests to design learning spaces and age, cultural and linguistically appropriate experiences that guide and facilitate children's physical, social and emotional, and cognitive learning. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

- Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

Describe:
Pennsylvania supports and promotes the implementation of PBIS including incentivizing the use of PBIS to fidelity in the Keystone STARS points structure for STAR 3 and 4 programs. ECMH Consultation, available to Keystone STARS programs, has as a primary explicit goal the reduction of suspensions and expulsions of children from early learning programs due to challenging behaviors. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress
towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

- Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development

Describe:
Training and professional development aligned to CKC Knowledge Area 5 relate to the above topics. Knowledge Area 5 - Family, Schools, and Community Collaborations and Partnerships: The partnerships that early childhood and school-age professionals develop with families are critical to supporting children's successful and confident growth and educational experiences in the out-of-home setting. Children thrive when their learning professionals and family members work together to embed culture and values within the children's school experience and to develop ongoing, respectful, and reciprocal communication strategies. Early childhood and school-age professionals must be aware of community resources and help families to make those connections when needed. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework.
Payment for coursework may be negotiated by course, clock hours and/or credit hours.

- Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.
  
  Describe:

- Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families’ access to services that support their children’s learning and development
  
  Describe:

Training and PD aligned to CKC Knowledge Area 3, Families, Schools and Community Collaboration and Partnerships, relate to these topics: Early childhood and school-age professionals understand and respect the family, culture, and community context in which each child lives. They demonstrate practices that build strong, positive connections to families, and community resources for the benefit of children. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

- Using data to guide program evaluation to ensure continuous improvement
Describe:
Training and PD aligned to CKC Knowledge Area 8, Program Organization and Administration, relate to this topic: Early childhood and school-age professionals demonstrate knowledge of accepted business practices, legal and regulatory requirements, financial obligations, and record keeping while engaging in ongoing continuous quality improvement practices. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL’s Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

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

Describe:
Competencies within both the Child Growth and Development and Family, Schools and Community Collaborations and Partnerships CKC Knowledge Areas address these topics. Examples of these competencies include “Design strategies to address issues and policies related to practice which intentionally impact child development and learning, including: Inclusion, Diversity, Brain Development, Children and Families at Risk, Poverty” “Support program staff in their classroom practices that are impacted by inclusion, diversity, brain development, children and families at risk and poverty.” "Create and utilize multiple, strength-based strategies to educate families and staff with challenging issues such as divorce, abuse, unemployment, deployment, poverty, inclusion, etc." OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide
Caring for and supporting the development of children with disabilities and developmental delays

Describe:
PD regarding caring for children with disabilities and developmental delays is available through EITA. Training is available both online and in face-to-face sessions, covering a variety of topics related to developmental delays, behavioral challenges, and EI services. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

Supporting the positive development of school-age children

Describe:
Pennsylvania supports School-Age Child Care (SACC) projects through its regional business partners. The SACC projects deliver specialized PD and technical assistance focused on the needs of school-age children. In addition, the PA Key
administers the PA School-Age Professional Credential (SAPC), modeled after the CDA Credential. In 2013-2014, Pennsylvania began implementing the National Institute on Out-of-School Time's program: "After-School Quality: The Process of Program Improvement." As Pennsylvania moves forward with the new STARS Standards, school-age providers will continue to be offered PD opportunities and credit bearing coursework (leading to degrees) in a continuing effort to improve quality and workforce development. OCDEL utilizes business partners to deliver the approved content to ECE professionals with the intent that the content delivered is credit bearing and will allow participants to progress towards a degree. The partners include but are not limited to, Institutes of Higher Education (e.g. colleges, and universities), statewide consultants/contractors that have been vetted through the OCDEL's Pennsylvania Quality Assurance System (PQAS) and/or nationally recognized organizations such as Better Kid Care, ECELS, and local First Aid/CPR professional development organizations. The educational partners are funded via contracts issued by OCDEL to the PA Key (OCDEL grantee) then through subrecipient agreements with regional partners. At the regional level, subrecipients agreements are established via a network of partners (a sample of partners is listed above) for specific/required coursework. Payment for coursework may be negotiated by course, clock hours and/or credit hours.

☐ Other
Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

☑ Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

☐ Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

☑ Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

☐ Other
7.3.2 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL has established annual STAR level participation goals for each STAR level and monitors the business partners responsible for these quality activities on a quarterly basis through the Keystone STARS participation and STAR level movement report. This report reviews and allows for analysis of the number of participating programs by provider type, STAR level, and also indicates the number of low income children receiving CCW. Information can be viewed by care level and program type. The report also allows for analysis of the number of programs that move up and move down a STAR level and the number of programs with suspended licenses who are STARS participants. OCDEL will continue to explore ways to make aggregate data available to stakeholders for planning purposes.

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:
1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education
7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

☐ No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.

☐ No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.

☑ Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

Pennsylvania's QRIS is operating statewide through regionally based business partners, the ELRCs. Information about the QRIS can be found at: www.pakeys.org. The business partners regionally designated to support the goals around access to high-quality early learning are the ELRCs. Each ELRC has individual performance targets. These targets are designed to coordinate at the regional level to build on community strengths and address barriers to access for families. Some examples of targets address number and type of stakeholder meetings; percentage of child care programs moving up in their quality rating; supportive practices related to health and safety training aligned with child care certification; and numbers of new providers recruited. The ELRC business partner model is newly implemented in the last quarter of FFY 18, so at the time of submission information as to how Pennsylvania has met these measures is not available.

☐ Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

☐ Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.
7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

☐ Participation is voluntary

☐ Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

☑ Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory’s QRIS? Check all that apply

☑ Licensed child care centers

☑ Licensed family child care homes

☐ License-exempt providers

☑ Early Head Start programs

☑ Head Start programs

☐ State prekindergarten or preschool programs

☐ Local district-supported prekindergarten programs

☑ Programs serving infants and toddlers

☑ Programs serving school-age children

☐ Faith-based settings

☐ Tribally operated programs

☐ Other

Describe:

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead
Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory’s quality improvement standards align with or have reciprocity with any of the following standards?

☐ No

☑ Yes. If yes, check the type of alignment, if any, between the state/territory’s quality standards and other standards. Check all that apply.

☐ Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system).

☑ Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).

☑ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).

☐ Programs that meet all or part of state/territory school-age quality standards.

☐ Other.

Describe:

7.4.4 Do the state/territory’s quality standards build on its licensing requirements and other regulatory requirements?

☐ No

☑ Yes. If yes, check any links between the state/territory’s quality standards and licensing requirements

☐ Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.

☑ Embeds licensing into the QRIS
State/territory license is a "rated" license
☐ Other.
Describe:

7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS

☐ No
☒ Yes. If yes, check all that apply
☐ One time grants, awards, or bonuses.
☐ Ongoing or periodic quality stipends
☐ Higher subsidy payments
☐ Training or technical assistance related to QRIS.
☐ Coaching/mentoring.
☐ Scholarships, bonuses, or increased compensation for degrees/certificates
☐ Materials and supplies
☐ Priority access for other grants or programs
☐ Tax credits (providers or parents)
☐ Payment of fees (e.g., licensing, accreditation)
☐ Other
Describe:

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL has established annual participation goals for each STAR level and monitors the business partners responsible for these quality activities on a quarterly basis through the Keystone STARS participation and STAR level movement report. This report reviews and
allows for analysis of the number of participating programs by provider type, STAR level, and also indicates the number of low income children receiving CCW. Information can be viewed by care level and program type. The report also allows for analysis of the number of programs that move up and move down a STAR level and the number of programs with suspended licenses who are STARS participants. OCDEL will continue to explore ways to make aggregate data available to stakeholders for planning purposes.

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

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

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

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers’ capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

  Describe:

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.
Describe:

☑ Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

Pennsylvania CKCs linked to the PD Calendar and Workforce Registry. There are significant offerings available to support infant and toddler providers and OCDEL is partnering with IHEs to increase the number of credit bearing infant/toddler coursework offerings. Both quality and infant-toddler funds are used to support this effort. The PD registry tracks PD attributed to infant-toddlers to differentiate the funds.

☑ Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

Pennsylvania supports TA related to infants and toddlers in three ways. The first is Child Care Health Consultation, which support the integration of health and safety practices in infant and toddler rooms. The second model, STARS Coaching/TA which can address general practices and supports around program structure and the infant-toddler environments. The third model, Infant Toddler TA is in-depth TA to enhance the activities and relationships in the provider's setting and with relationships with the parents.

☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

☐ Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

Keystone STARS requires infant and toddler classrooms to meet minimum thresholds in classroom observations tools prior to a program achieving a STAR 3 or 4.

☐ Developing infant and toddler components within the state/territory's child care licensing regulations
Describe:

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:
Pennsylvania developed a landing page to make locating information easier for parents. This website connects parents with the required consumer education information for CCDBG as well as other interesting materials parents can access. In addition, the Early Learning GPS found at [https://www.earlylearninggps.com/](https://www.earlylearninggps.com/) allows parents to look at appropriate information based on their child's age.

Describe:

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

Describe:

- Coordinating with child care health consultants.

Describe:
Child Care Health Consultants support child care programs in meeting both basic health and safety needs as well as best practice for those serving infants and toddlers. The child care health consultants are accessed through the ELRCs.

Describe:

- Coordinating with mental health consultants.

Describe:
The ECMH project supports children 0-5 in maintaining their enrollment in their child care program while supporting programs in adapting their practice to ensure developmentally appropriate expectations and resources for infants and toddlers as well as preschool age children.
7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL has a number of dashboards that are able to segment data around child-level enrollments by STAR level, level of care, county, and evaluate data about the CCW waitlist. This information allows the office to measure progress of percentages of children enrolled in high-quality care and deploy resources and develop strategies to address gaps accordingly.

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

COMPASS and the information systems that connect to it make data available to OCDEL on the number and location of early learning programs as well as information on the program’s compliance with health and safety requirements and participation in QRIS. OCDEL utilizes
this information to determine where supply is limited and where efforts to build capacity and quality should be targeted. Information on programs can be drilled down to school districts and zip codes as needed.

7.7 Facilitating Compliance With State Standards

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

Quality funds are used to provide a source of ongoing PD and TA to child care providers across a variety of topics. OCDEL partners with the Office of Mental Health and Substance Abuse Services to support Early Childhood Mental Health TA; Bureau of Early Intervention Services and Family Support and its partners support PD and TA for PBIS; as well as managing PQAS to offer needs based TA. In the structure of supporting child care providers, there is also a relationship with the Bureau of Certification Services and the ELRCs to provide specific support around regulatory referrals. Regulatory referrals are specific TA/PD requests related to child care certification infractions such as supervision or basic health and safety. The ELRCs, supported by quality funds, offer the necessary supports to address individual child care corrective action plans.

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

☑ No

☐ Yes. If yes, which types of providers can access this financial assistance?

☐ Licensed CCDF providers
7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL monitors data elements from the PELICAN system to analyze compliance with health and safety requirements. OCDEL and each ELRC receive reports relevant to the child care providers they support. The reports can be used to coordinate PD with certification staff or other PD/TA providers.

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

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

OCDEL established a Keystone STARS participation report that reviews and allows for analysis of the number of participating programs by provider type, STAR level, and indicates the number of low income children receiving CCW. Information can be viewed by care level and program type. The report also allows for analysis of the number of programs that move up and move down a STAR level and the number of programs with suspended licenses who are STARS participants. As part of Keystone STARS, participating providers are required to reach increasing content knowledge of PD topics. This is accomplished through the PD
Registry. This web-based system currently captures participant entered qualifications, linking them with the provider they are working for. Additionally, the practitioners complete the online self-assessment based on the CKCs. This information can be accessed at the individual, program, region, or state level to evaluate workforce as well as PD needs. A final source of information is provided through the Program Quality Assessment (Environment Rating Scales (ERS) and CLASS) system. Pennsylvania uses the suite of tools to self-assess classrooms at STAR 2 and have an OCDEL approved assessor assess classrooms or environments at STAR 3 and 4. Analysis and reports are available and allow OCDEL and its partners to develop supporting PD.

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL has established annual STAR level participation goals for each STAR level and monitors the business partners responsible for these quality activities on a quarterly basis through the Keystone STARS participation and STAR level movement report. OCDEL is making significant progress on meeting the goals set for STAR level participation for SFY17-18. OCDEL monitors a regular Keystone STARS report which provides information as to the number of child care and other early learning programs that have moved up or down in the STARS level, or that have a suspended certificate of compliance. This information is generated from PELICAN-KTQ. OCDEL also uses three supplementary systems for data analysis around quality movement. The first is the PD Registry. OCDEL and its partners can review and analyze the frequency and demand around approved PD offered. The system also allows for analysis of aggregate data of the needs based on all child care staff completing a self-assessment using the CKCs. This analysis allows for the prioritization and individualization of PD by region statewide. The second system is the information management system for Program Quality Assessment tools and scales. The system allows for the review of the various tools and the scoring of each. By looking at associated reports, trends are able to be determined with also contribute to needs in supporting PD or TA for child care in the STARS system. The final system is the STARS Management and Reliability
Tracking (SMART) database. SMART is the web-based tool used by the quality designators. The reports and analysis available from this source identify barriers to a STAR designation and also contribute to deployment of resources.

### 7.9 Accreditation Support

#### 7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☑ Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

OCDEL revised the accreditation reciprocity alignments during 2016-2017’s Keystone STARS revisioning process to both address the administrative burden and streamline the monitoring process for programs demonstrating high-quality practices under a national accreditation framework. OCDEL recognizes the National Association for the Education of Young Children (NAEYC), National Early Childhood Program Accreditation (NECPA), National Association for Family Child Care (NAFCC), HS/EHS, and Association of Christian Schools International (ACSI) for programs also in full compliance with DHS child care certification. STAR 2 programs may use one of the STARS incentives, Merit Awards, to financially support the program’s accreditation process if eligible.

☐ Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

☐ Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care
7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

OCDEL designates programs participating in accreditation as a STAR 4. Through PELICAN-KtQ and SMART, OCDEL can monitor all the data elements collected as part of the STARS program participation and complete analysis by provider types. Accredited programs continue to participate in the STARS renewal process and submit information in to the PD system. This allows OCDEL to monitor their performance based on accreditation.
7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

OCDEL, in partnership with early care and education stakeholders, develops and adopts the Keystone STARS performance standards which provide a rigorous and clear path for early care and education providers to move from STAR 1 (meeting certification requirements) to STAR 3 and 4 (high quality services for children). The Keystone STARS performance standards are inclusive of indicators intended to support infants, toddlers, preschoolers and school age children including indicators specifying minimum threshold scores for classroom observation assessment tools for each age group and well as the use of specific Pennsylvania Learning Standards for Early Childhood that intentionally connect to Pennsylvania’s Learning Standards in K-12. 7/1/2018 was the launch of the fully revisioned Keystone STARS system. On-going development and adaptations to increase the quality of the Keystone STARS program will continue to be in partnership with stakeholders and research partners to ensure the integrity and rigor of the QRIS system.

7.10.2 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

STAR level goals indicate progress of moving programs through the necessary PD while ensuring Quality Coaches support programs in accessing appropriate resources. Overall, there is the monitoring and analysis of the PD offerings as to the numbers, types, and frequency of offerings. The PD Registry collects and evaluates information as to the relevance of the materials and content to the student’s role in their program. Information related to health practices is collected and reviewed from a number of sources. The ERS has health-related content to which the BIG data base is able to generate reports which can
contribute to OCDEL and its partners offering targeted supports. STARS Coaching/TA, Infant Toddler Specialist data, Child Care Health Consultation, and After School Quality SAC are all traced in PELICAN-KTQ. ECMH consultation is traced in a customized data base outside of PELICAN systems.

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory’s progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

The Early Learning Guidelines were updated using Race to the Top- Early Learning Challenge funds. Pennsylvania’s Learning Standards from birth through second grade are the foundation upon which all state-funded early childhood education programs build quality. As Pennsylvania has refined its academic standards for Kindergarten-12th grade, it refined its Learning Standards for Early Childhood to align with these new expectations for children at kindergarten entry, with greater attention to cultural, developmental and linguistic appropriateness. Revised Infant/Toddler and Prekindergarten Early Learning Standards were released in early July 2014. Revised Kindergarten, First and Second grade standards were released in 2016. As indicated in the response to 7. 10, the Learning Standards for Early Childhood are embedded in Pennsylvania’s QRIS. Pennsylvania offers a comprehensive system of assessments such as early developmental screening and ongoing assessment of children’s progress, program quality, and the quality of adult-child interaction. Pennsylvania will continue to focus on improving access to, quality and application of birth-Pre-K assessment systems, using information collected through the on-going development and adoptions to increase the quality of the Keystone STARS program. CCDF funding will continue to support the distribution and on-going professional development around the Learning Standards for Early Childhood.
7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

OCDEL adopted a pre-natal to 3rd grade (P-3) alignment philosophy. In order to improve the quality of services in communities, OCDEL supports PD for teams around enhancing services to children, engaging families, and strengthening community and K-12 connections. This effort is designed for local child care and K-12 to become more familiar with the other, strengthen PD, and better support enrolled families as they transition. In addition, OCDEL anticipates the investment of Pennsylvania Department of Education funds to continue the support of the Kindergarten Entry Inventory (KEI) database to both collect and analyze reported KEI results from school districts and early learning partners.

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

-- Memorandums of understanding within the Lead Agency’s various divisions that administer or
carry out the various aspects of CCDF

-- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

☑ Train on policy manual
Describe:
OCDEL staff are trained on new policy before it is implemented. Staff are "re-trained" annually on specific policies and on any updates to existing policies. This measure is conducted to ensure there is uniform interpretation and evaluation of the policy when monitoring contractors. Additional guidance and updated documents/tools (Program Review Instrument, monitoring worksheets, etc.) are provided and reviewed prior to onsite monitoring. OCDEL posts all policy communications and chapters on the ELRC portal site so it is accessible at all times. The ELRCs have been instructed to check the portal daily for new postings. On major policy changes or new policy, OCDEL will do trainings for the ELRCs through webinars, communications or regional on-site trainings. A question/answer folder is also on the ELRC portal so OCDEL can provide clarifications to any questions.

☑ Train on policy change notices
Describe:
OCDEL has routine meetings with monitoring staff to go over policies, answer questions
and discuss next steps. When necessary, additional guidance documents are created and reports are run to ensure accurate interpretation and uniformed reporting. OCDEL posts all policy communications and chapters on the ELRC portal site so they are accessible at all times. The ELRCs have been instructed to check the portal daily for new postings. On major policy changes, OCDEL will do trainings for the ELRCs through webinars, communications or regional on-site trainings. A question and answer folder is on the ELRC portal so OCDEL can provide clarifications to any questions.

**Ongoing monitoring and assessment of policy implementation**

Describe:

OCDEL monitors the ELRCs to ensure timeliness and correct disposition in managing program and policy changes. OCDEL also monitors the ELRC business processes by reviewing reports and researching cases on a varying basis. In some instances, follow-up sessions are scheduled when issues are identified as recurring for a specific subgrantee. For policies that impact data systems, OCDEL conducts random monitoring of data records throughout the year to ensure implementation compliance. Any non-compliance is recorded and a corrective action plan may be required to be submitted by the grantee.

**Other**

Describe:

OCDEL also provides a variety of job aids, work flows, and question and answer documents to be used by the subgrantee when training new staff or when existing staff needs clarification or updating regarding the revised policies and procedures. In addition to the pre-developed materials, OCDEL has established a protocol by which the ELRC may submit questions regarding specific circumstances that require additional clarification. The protocol for submitting questions for additional clarification is streamlined to provide timely and thorough responses. Questions are answered directly by OCDEL's subject matter expert, based upon the topic to which the question is related. Telephone and in-person conferences are held, as needed, for very complex circumstances or if multiple lead agencies are vested in the final resolution.
8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

- Verifying and processing billing records to ensure timely payments to providers
  
  **Describe:**
  
  OCDEL includes a review of provider invoices and payments in its annual monitoring of the ELRCs' management of the CCW program. If warranted, identified errors may be addressed through a corrective action plan and adjustments to provider payments.

- Fiscal oversight of grants and contracts
  
  **Describe:**
  
  OCDEL uses the Performance Standards Monitoring Tool to provide monitoring consistency across all ELRC sub-grantees. The Monitoring Tool addresses customer service, including resource and referral, caseload management which includes eligibility and policy compliance, and Administration, which addresses funds management. ELRCs are informed of the results of the monitoring and a plan of correction may be required if deficiencies exist. ELRCs are required to have independent audits annually and agree to follow all terms of the grant which governs their operations. Annual independent audit reports are reviewed by OCDEL for exceptions and corrective action is taken as necessary. The bureau director reviews and approves the final/annual ELRC monitoring reports for completeness and accuracy. After review by the bureau director, the office communicates any deficiencies in ELRC performance directly to ELRC management. Annual monitoring documents are maintained in each ELRCs monitoring file.

- Tracking systems to ensure reasonable and allowable costs
  
  **Describe:**
  
  ELRCs are required to complete monthly expenditure reporting and to seek approval in advance for expenditures exceeding pre-determined thresholds. PELICAN Keys to Quality (KTQ) Fiscal Allocation Screens are monitored for: spend down of state and federal quality dollars known as Keystone STARS grants and awards; comparison to invoice and expenditures; and for ELRC performance with grant approved payments and
grant closeout activity. PELICAN-KTQ reports are pulled and reviewed to support monitoring of the quality dollars to providers and to provide details for federal reporting as it relates to infant and toddler expenditures.

☐ Other
Describe:

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

☑ Conduct a risk assessment of policies and procedures
Describe:
OCDEL routinely participates in risk assessment of activities and audits conducted by external auditing firms as it relates to CCDF. In the recent past, these audits have revealed there are not gaps in processes or procedures and no internal control deficiencies. These internal controls, processes, and procedures will continue in the future.

☑ Establish checks and balances to ensure program integrity
Describe:
OCDEL contracts with ELRCs that manage CCDF dollars for subsidized child care and the quality rating improvement system. There are 19 ELRC service regions in Pennsylvania and OCDEL maintains monitoring agreements with all of them. All agreements are reviewed and signed by subgrantee administrators as well as various commonwealth personnel, including the Program Deputy Secretary, Comptroller Operations personnel, the DHS Office of Legal Counsel, etc. In addition, the agreement package includes detailed budgets outlining the proposed use of the CCDF Funds. Budgets are reviewed by OCDEL personnel to ensure activities are allowable and in compliance with program regulations. The costs become part of the authorized agreement package between the commonwealth and grantee. In addition to ELRC subgrantees, OCDEL also contracts with the PA Key as the statewide business partner contractor for quality services and supports. The PA Key supports statewide coordination of Pennsylvania's PD system, PA's program level assessment efforts (i.e. the
Environment Rating Scale (ERS) suite, the CLASS, etc.) and assists in monitoring and supporting PA Pre-K Counts, HSSAP, EHS-CCP grantees, and coordinates PA's credentialing efforts and infant/toddler work. On-site monitoring of the ELRC is performed annually (typically in June) to determine whether they are in compliance with state and federal regulations, program deliverables, and policies and to ensure costs and activities are allowable. The standard areas of testing are: Compliance with the Program Review Instrument (PRI); State and federal programmatic/funding requirements; Provider monitoring procedures. ELRC administrative/management performance is monitored monthly for spend down via submitted invoices, quarterly via submitted PRI, program narratives, annual on-site monitoring by OCDEL, and through independent audits to comply with the Uniform Circular. A final annual report is issued to the ELRC along with a Plan of Correction for any findings or items that need improvement (if any). After final reports are completed, they are sent to the bureau director for review and approval. Annual monitoring documents are maintained in the respective ELRC monitoring files. All of the ELRC are subject to Single Audits in accordance with the federal Uniform Circular. The final/complete audit is required to be sent by ELRC to the commonwealth for review/evaluation with one copy going to the OCDEL program office and a copy going to DHS audit team.

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:
Supervisory reviews are conducted annually by reviewing a selection of Performance Standards monitoring results.

Other

Describe:
Pennsylvania participates in the triennial Federal Improper Payments Error Rate Review for the CCDF program. For federal record review years, the state uses a pre-approved Record Review Worksheet which includes boilerplate language, updates and state-customized language. The worksheet provides a standardized format to assess the case record, to determine whether the child was eligible and received correct subsidy payment for the sample review month. For federal review years, Pennsylvania chooses the sample size of 276 cases. In addition, if the federal cases to be reviewed do not include at least ten cases per subgrantee, the state reviews a minimum of ten cases per each
subgrantee per year. Any additional cases are not included in the sample of 276 for ACF-404 reporting. All cases reviewed on non-federal review years and all cases over and above the federally required ones are reviewed using a standardized compliance monitoring tool that is based on the Federal Record Review Worksheet. Any error rate, including payment error rates, which exceed 10 percent requires a corrective action plan from the subgrantee. For federal review years, required corrective action plans and progress reports will be submitted to the Assistant Secretary for review and approval. All corrective action plans are reviewed with the ELRC. The state monitors the subgrantee until compliance is met.

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

☑ Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe
The ELRCs communicate on a regular basis with the County Assistance Offices (CAO's) who administer the TANF, SNAP and Medicaid programs. Information is shared on an as-needed basis. Information from the PARIS, when appropriate, is shared with the ELRCs. As needed, OCDEL communicates and obtains information from the Child and Adult Care Food Program. The information shared is used to
review program eligibility and possible fraud that may involve several programs.

- Run system reports that flag errors (include types).
  Describe:
  OCDEL has the option to run a variety of reports on an as-needed basis to identify potential errors. There are several reports that identify one or more of the following: enrollments by funding programs, the type of enrollment and amount paid; timely processing related to applications, enrollment, eligibility, redetermination, reported changes and payment; sanction or disqualification statuses; budget openings or closures related to cases in which the parent or caretaker is a recipient of TANF benefits; and accurate co-payment assessment or waiver of co-payment.

- Review enrollment documents and attendance or billing records
  Describe:
  The program monitors, referred to as the program representatives, run enrollment reports on a monthly basis, or as needed. The yearly monitoring requires reviewing enrollment documents along with provider payments for specific case records. Program representatives and ELRC's review attendance and billing records on an as-needed basis to determine potential fraud. Possible fraud cases are sent to the Office of State Inspector General for additional follow-up.

- Conduct supervisory staff reviews or quality assurance reviews.
  Describe:
  Reviews are conducted annually by reviewing a random selection of cases for the ELRC.

- Audit provider records.
  Describe:
  ELRCs are required to have independent audits annually and agree to follow all terms of the grant which governs their operations. Annual independent audit reports are reviewed by OCDEL for exceptions, and corrective action is taken as necessary.

- Train staff on policy and/or audits.
Describe:
OCDEL and ELRC staff are trained on policy and/or audits. Trainings can be through written communications, webinars or regional face-to-face meetings. Training materials are also posted to the ELRC portal so they are accessible to all staff at any time.

☑ Other
Describe:
OCDEL reviews case and eligibility information from PELICAN-CCW system and the Client Information System (CIS). CIS contains case and eligibility-related information for parents or caretakers that are receiving or have previously received TANF benefits. OCDEL also monitors contractor compliance and data integrity (via PELICAN Keys to Quality) as it relates to provider eligibility for quality grants and awards, accuracy of grant threshold amounts and STAR level designations. OCDEL and the PA Department of Revenue coordinate the review of STARS providers against Revenue's database for tax liens/liabilities. OCDEL contractors review the federal System for Award Management (SAM) website to ensure there are no federal issues prior to issuing quality grants and will review the PA Department of General Services (DGS) Debarment list to ensure no providers are identified on the state's contractor debarment list. The use of these resources ensures state and federal dollars are not issued when state/federal funds are owed or when problems exist. This process has netted recovery of substantial amounts of state/federal funds paid by providers. OCDEL and Revenue have also coordinated statewide trainings to assist contractors and child care providers on the tools and resources available through Revenue to ensure providers know tax and filing requirements.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.
Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:
The ELRCs communicate on a regular basis with the County Assistance Offices (CAOs) who administer the TANF, SNAP and Medicaid programs. Information is shared on an as-needed basis. Information from the PARIS, when appropriate, is shared with the ELRCs. As needed, OCDEL communicates and obtains information from the Child and Adult Care Food Program. The information shared is used to review program eligibility and identify program violations that may involve several programs.

Run system reports that flag errors (include types).

Describe:
OCDEL has the option to run a variety of reports on a regular and sporadic basis to identify potential errors. There are several reports that identify one or more of the following: enrollments by funding programs; the type of enrollment and amount paid; timely processing related to application, enrollment, eligibility, redetermination, reported changes and payment; sanction or disqualification statuses; budget openings or closures related to cases in which the parent or caretaker is a recipient of TANF benefits; and accurate co-payment assessment or waiver of co-payment.

Review enrollment documents and attendance or billing records

Describe:
The program monitors, referred to as the program representatives, run enrollment as needed. The yearly monitoring requires reviewing enrollment documents along with provider payments for specific case records. Program representatives and ELRC's review attendance and billing records on an as-needed basis to determine potential program violations. Program violations are reviewed for potential fraud and overpayments.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:
Reviews are conducted annually by reviewing a random selection of cases for the ELRC.
Audit provider records.
Describe:

Train staff on policy and/or audits.
Describe:
OCDEL and ELRC staff are trained on policy and/or audits. Trainings can be through written communications, webinars or regional face-to-face meetings. Training materials are also posted to the ELRC portal so it is accessible to all staff at any time.

Other
Describe:
OCDEL reviews case and eligibility information contained in the PELICAN-CCW system and CIS. CIS contains case and eligibility information for parents or caretakers that are receiving or have previously received TANF benefits.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).
Describe:
The ELRCs communicate on a regular basis with the County Assistance Offices (CAOs) who administer the TANF, SNAP and Medicaid programs. Information is shared on an as-needed basis. Information from the PARIS, when appropriate, is shared with the ELRCs. As needed, OCDEL communicates and obtains information from the Child and Adult Care Food Program. The information shared is used to review program eligibility, prevent agency errors and identify program violations that may involve several programs.

Run system reports that flag errors (include types).
Describe:
OCDEL has the option to run a variety of reports on a regular and sporadic basis to
identify potential errors. There are several reports that identify one or more of the following: enrollments by funding programs; the type of enrollment and amount paid; timely processing related to application, enrollment, eligibility, redetermination, reported changes and payment; sanction or disqualification statuses; budget openings or closures related to cases in which the parent or caretaker is a recipient of TANF benefits; and accurate co-payment assessment or waiver of co-payment.

☑ Review enrollment documents and attendance or billing records
Describe:
The program monitors, referred to as the program representatives, run enrollment as needed. The yearly monitoring requires reviewing enrollment documents along with provider payments for specific case records. Program representatives and ELRC's review attendance and billing records on an as-needed basis to determine and prevent potential program errors.

☑ Conduct supervisory staff reviews or quality assurance reviews.
Describe:
Reviews are conducted annually by reviewing a random selection of cases for the ELRC.

☑ Audit provider records.
Describe:
Provider records are reviewed as part of the annual compliance review for CCW. Families selected for review are matched with the provider where their children were enrolled during the review period. The review confirms the provider's certification status and their ability to participate in the subsidized child care program.

☑ Train staff on policy and/or audits.
Describe:
OCDEL and ELRC staff are trained on policy and/or audits. Trainings can be through written communications, webinars or regional face-to-face meetings. Training materials are also posted to the ELRC portal so it is accessible to all staff at any time.
Other
Describe:
OCDEL reviews case and eligibility information contained in the PELICAN-CCW system and CIS. CIS contains case and eligibility information for parents or caretakers that are receiving or have previously received TANF benefits.

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:
There is no minimum dollar amount for payments issued by an ELRC subgrantee.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:
Overpayments as a result of fraud are referred to the Office of State Inspector General for investigation, referral to the District Attorneys Office, and/or recover overpayments.

- Recover through repayment plans.

Describe:
Providers receiving quality funds are suspended from STARS (stopping quality add on amounts and quality grants) until repayment is made to the ELRC contractor or the Commonwealth via the ELRC. The repayment plans are developed based on the provider's ability to pay. For CCW, the provider may be given the option of a lump sum repayment or establishment of a payment plan.
Reduce payments in subsequent months.
Describe:
A recoupment letter is generated to the provider that details the amount of the recoupment and the percentage of recoupment from each payment.

Recover through state/territory tax intercepts.
Describe:

Recover through other means.
Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
Describe:

Other
Describe:
Pennsylvania subsidized child care regulations state that parents or caretakers may not be required to repay an overpayment that is the result of an administrative error, with the exception of cases including current recipients of TANF benefits.
Overpayments that are not the result of an administrative error are collected by arranging payment plans with parents or caretakers. ELRCs can withhold payment from a provider who violates the provider agreement. Pelican CCW is designed to automatically recoup outstanding overpayments, regardless of the fiscal year.

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount
Describe:
There is no minimum dollar amount for payments issued by an ELRC subgrantee. Pennsylvania subsidized child care regulations state that parents or caretakers may not be required to repay an overpayment that is the result of an administrative error, with the exception of cases including current recipients of TANF benefits.

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

☑ Recover through repayment plans.

Describe:
For CCW, the provider may be given the option of a lump sum repayment or establishment of a payment plan.

☑ Reduce payments in subsequent months.

Describe:
A recoupment letter is generated to the provider that details the amount of the recoupment and the percentage of recoupment from each payment.

☐ Recover through state/territory tax intercepts.

Describe:

☐ Recover through other means.

Describe:

☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

☑ Other

Describe:
Pennsylvania’s subsidized child care regulations state that parents or caretakers may not be required to repay an overpayment that is the result of an administrative error,
with the exception of cases including current recipients of TANF benefits which are handled solely through the arrangement of a payment plan. Providers that no longer have a Provider Agreement will be advised of the need to repay the amount owed and provide repayment options outside of the PELICAN CCW system. PELICAN CCW is designed to automatically recoup outstanding overpayments, regardless of the fiscal year. Once an administrative error has been identified, OCDEL will review the error with the ELRC. The ELRC is expected to correct the error going forward. If warranted, a Plan of Correction will be issued.

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

☑ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:
For providers, there is no minimum dollar amount for payments issued by an ELRC subgrantee. Pennsylvania subsidized child care regulations state that parents or caretakers may not be required to repay an overpayment that is the result of an administrative error, with the exception of cases including current recipients of TANF benefits.

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

☑ Recover through repayment plans.
Establish a unit to investigate and collect improper payments.
For CCW, the provider may be given the option of a lump sum repayment or establishment of a payment plan.

☑ Reduce payments in subsequent months.
Describe:
A recoupment letter is generated to the provider that details the amount of the
recoupment and the percentage of recoupment from each payment.

☐ Recover through state/territory tax intercepts.
Describe:

☐ Recover through other means.
Describe:

☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
Describe:

☐ Other
Describe:
Pennsylvania's subsidized child care regulations state that parents or caretakers may not be required to repay an overpayment that is the result of an administrative error, with the exception of cases including current recipients of TANF benefits which are handled solely through the arrangement of a payment plan. Providers that no longer have a Provider Agreement will be advised of the need to repay the amount owed and provide repayment options outside of the PELICAN CCW system. PELICAN CCW is designed to automatically recoup outstanding overpayments, regardless of the fiscal year. Once an administrative error has been identified, OCDEL will review the error with the ELRC. The ELRC is expected to correct the error going forward. If warranted, a Plan of Correction will be issued.

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

☐ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.
Describe:
If a parent or caretaker is found guilty of committing an IPV or fraud, the family is
prohibited from participating in the subsidized child care program for a period of six months from the date of the first conviction, hearing decision or determination; a period of twelve months from the date of the second conviction, hearing decision or determination; and permanently from the date of the third conviction, hearing decision or determination. Pennsylvania regulations allow a parent or caretaker 30 calendar days from the date the parent or caretaker receives notice about an intentional program violation to appeal the original facts of the intentional program violation or fraud through the Pennsylvania DHS. The parent or caretaker cannot appeal the disqualification decision through DHS. The regulations state a parent or caretaker may not be granted a hearing on a court conviction or administrative disqualification hearing decision that lead to the disqualification. However, the parent or caretaker can file an appeal through the Commonwealth Court of Pennsylvania.

☑ Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.
Describe:
Each provider participating in the subsidized child care program must sign a Provider Agreement. OCDEL may end the Provider Agreement with any provider that is convicted of fraud. Ending a Provider Agreement may not be appealed. OCDEL's Bureau of Certification Services may revoke or refuse to renew the provider's certificate to operate if the provider is convicted of fraud. The provider can appeal the decision to revoke or refuse to renew the certificate. Appeals are heard by DHS Bureau of Hearings and Appeals and the provider may appeal to the Commonwealth Court if the Bureau of Hearing and Appeals decides against the provider.

☑ Prosecute criminally.
Describe:
The Office of State Inspector General (OSIG) will review and, if appropriate, will prosecute provider-only fraud overpayments. If the OSIG feels that the fraud is criminal in nature, the case is referred to the local District Attorney for criminal prosecution. The District Attorney will review and determine if the case will go to court for criminal prosecution.

☑ Other.
Describe:
The Keystone STARS program suspends or removes the STAR rating for providers who have violated the terms of the grant agreement or non-compliance with state and federal regulations. Providers in violation are suspended from receiving grants and tiered reimbursements until the violations are corrected at which time the provider is reinstated into the Keystone STARS program. The Keystone STARS program utilizes the OIG to report misspent funds or alleged fraud by providers. Should the OIG agree that the violation is in fact fraud; the violation is handed over to the District Attorney for further review/prosecution, if deemed appropriate.

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)). These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019
Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

Appendix A.5: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a))

Describe the provision from which the state/territory seeks relief.

Sec.98.43 (b) (2)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the NSOR search requirements.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised at all times until completed clearances are on file.

Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related
question at 5.4.5 (b))
Describe the provision from which the state/territory seeks relief.
Sec. 98.43 (b) (2)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the NSOR search requirements.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

☑️ Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))
Describe the provision from which the state/territory seeks relief.
Sec. 98.43 (b) (3)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate criminal registry/repository.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

☑️ Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))
Describe the provision from which the state/territory seeks relief.
Sec. 98.43 (b) (3)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate criminal registry/repository.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))

Describe the provision from which the state/territory seeks relief.
Sec. 98.43 (b) (3)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate sex offender registry/repository.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))
Describe the provision from which the state/territory seeks relief.
Sec. 98.43 (b) (3)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate sex offender registry/repository.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))
Describe the provision from which the state/territory seeks relief.
98.43 (b) (3) (iii)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate child abuse & neglect registry.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))
Describe the provision from which the state/territory seeks relief.
98.43 (b) (3) (iii)

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
Pennsylvania will continue to require child abuse clearance, state police clearance and FBI clearance for all providers. The waiver will afford Pennsylvania the time needed to implement the requirement for the interstate child abuse & neglect registry.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
Pennsylvania requires a child abuse history clearance, a Pennsylvania state police clearance, and FBI fingerprint clearance for all child care providers. Additionally, Pennsylvania requires that any provider hired on a provisional basis must be supervised.

Appendix A. 13: New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9)

Describe the provision from which the state/territory seeks relief.
The Commonwealth is seeking a waiver with respect to the provisions in the CCDF Plan at 5.4.9 regarding Provisional Employment.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children
At the outset, the Commonwealth notes that a waiver is a public document. The very filing of a waiver request demonstrates a good-faith effort on the Commonwealth's part, and it further demonstrates the Commonwealth's willingness to come into compliance. A waiver, as a public document, fosters greater transparency and accountability; and as here, it provides opportunity to the Commonwealth to develop and implement processes that meet all regulatory requirements as prescribed by the CCDF Plan.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.
The health, safety, and well-being of children is paramount to the Commonwealth, and the Commonwealth's regulatory requirements presently in place demonstrate that commitment. Such commitment is further demonstrated by the Commonwealth's
entrance into the regulatory review process to propose, implement, and make final the regulatory requirements as are now prescribed by the CCDF Final Rule. Presently, the Commonwealth does not permit individuals to work unsupervised until the completed FBI, Pennsylvania state police, and child abuse clearances are returned. Such processes are already substantially similar to the machination of the CCDF Plan, and it is these processes that will be enhanced and safeguarded throughout the duration of the waiver while the Commonwealth ensures compliance with the CCDF Plan.