Child Care and Development Fund (CCDF) Plan
For
Maine
FFY 2016-2018

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1 Define CCDF Leadership and Coordination with Relevant Systems

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

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

1.1 CCDF Leadership

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

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

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

Name of Lead Agency: Department of Health and Human Services

Address of Lead Agency: 11 State House Station, Augusta, Maine 04333

Name and Title of the Lead Agency Official: Mary C. Mayhew, Commissioner of the Department of Health and Human Services

Phone Number: 207-287-4223

E-Mail Address: Mary.Mayhew@Maine.gov

Web Address for Lead Agency (if any): http://www.maine.gov/dhhs/index.shtml

1.1.2 Who is the CCDF administrator?

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

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Elissa Wynne

Title of CCDF Administrator: Child Care Services Team Leader

Address of CCDF Administrator: 2 Anthony Avenue, State House Station #11, Augusta, Maine 04333

Phone Number: 207-624-7917

E-Mail Address: Elissa.Wynne@Maine.gov

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

Name of CCDF Co-Administrator: Liz Ray

Title of CCDF Co-Administrator: TANF/ASPIRE Senior Program Manager

Phone Number: 207-624-4107

E-Mail Address: Liz.Ray@Maine.gov

Description of the role of the Co-Administrator:

The co-administrator will oversee the implementation of the CCDF State Plan as it relates to the Child Care Subsidy Program.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 207-624-7900 or toll free 1-877-680-5866

Web Address for CCDF program (for the public) (if any):
http://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html

Web Address for CCDF program policy manual (if any):
http://www.maine.gov/sos/cec/rules/10/chaps10.htm#148

Web Address for CCDF program administrative rules (if any):
http://www.maine.gov/sos/cec/rules/10/chaps10.htm#148

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

Outreach and Consumer Education (section 2)

Agency/Department/Entity DHHS-Office of Child and Family Services

Name of Lead Contact Elissa Wynne-Child Care Services Team Leader

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity DHHS-Office for Family Independence

Name of Lead Contact Liz Ray-TANF/ASPIRE Senior Program Manager

Licensing/Monitoring (section 5)

Agency/Department/Entity DHHS-Division of Licensing and Regulatory Services

Name of Lead Contact Janet Whitten-Children¿s Licensing and Investigation Manager

Child Care Workforce (section 6)

Agency/Department/Entity DHHS-Office of Child and Family Services

Name of Lead Contact Elissa Wynne-Child Care Services Team Leader

Quality Improvement (section 7)

Agency/Department/Entity DHHS-Office of Child and Family Services

Name of Lead Contact Elissa Wynne-Child Care Services Team Leader

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity DHHS-Office for Family Independence

Name of Lead Contact Liz Ray-TANF/ASPIRE Senior Program Manager

1.2 CCDF Policy Decision Authority

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

1.2.1 Which of the following CCDF program rules and policies are set or established at

the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

- [x] All program rules and policies are set or established at the State/Territory level.
- [ ] Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
  - [ ] Eligibility rules and policies (e.g., income limits) are set by the:
    - [ ] State/Territory
    - [ ] County.

    If checked, describe the type of eligibility policies the county can set

    - [ ] Other local entity (e.g., workforce boards, early learning coalitions).

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

    - [ ] Other.

    Describe:

  - [ ] Sliding fee scale is set by the:
    - [ ] State/Territory
    - [ ] County

    If checked, describe the type of sliding fee scale policies the county can set

    - [ ] Other local entity (e.g., workforce boards, early learning coalitions).

    If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

    - [ ] Other.

    Describe:

  - [ ] Payment rates are set by the:

☐ State/Territory

☐ County.

If checked, describe the type of payment rate policies the county can set

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set

☐ Other.

Describe:

☐ Other.

List and describe (e.g., quality improvement systems, payment practices):

1.2.2 How is the CCDF program operated in your State/Territory?

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

a) Who determines eligibility?

☑ CCDF Lead Agency

☑ TANF agency

Describe.

The Office for Family Independence (OFI) and the Office of Child and Family Services (OCFS), both residing within the larger, Department of Health and Human Services (DHHS), are integral in determining eligibility for the Child Care Subsidy Program (CCSP). Currently, OFI is the initial point of contact for applicants and is responsible for all financial eligibility determination activities and setting the parent fee amount. In

addition to determining financial eligibility for Child Care Subsidy Program OFI screens applications for eligibility for many other available public benefits and programs. Subsequently, OCFS determines program eligibility for the Child Care Subsidy Program. In order to ensure accountability and that federal requirements are fully implemented, OCFS and OFI maintain interdepartmental collaboration by holding meetings to implement consistent practices and to plan for needed process and program changes. After parents are determined to be eligible they are able to select a provider of their choice. Eligibility staff are able to assist families in locating a provider as needed. Beginning in 2015, Maine hired Public Consulting Group (PCG) to review the entire state-supported child care system. The goal of the review is to focus on aligning policies and practices to streamline and simplify experiences for parents and providers. Stemming from this project, Maine will be making many changes to the child care system beginning in the fall of 2016 which will be referred to in the remainder of this Plan as the "new child care system." The new child care system will see all parts of the Child Care Subsidy Program (CCSP) administered at OFI.

☑ Other State/Territory agency.

Describe.

The DHHS-Division of Licensing and Regulatory Services (DLRS) is responsible for health and safety regulations of all CCDF providers. This includes on-site inspections and background checks.

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

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

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

☑ CCDF Lead Agency

☑ TANF agency

Describe.

OFI, the TANF Lead Agency, may refer families to the consumer education website, Child Care Choices, as a resource to aid them in selecting a provider.

☐ Other State/Territory agency.

Describe.

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

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☑ Other.

Describe.

The Lead Agency is exploring working with Career Centers to share information and materials with parents in order to assist them in finding and paying for child care and to share the benefits of high-quality care.

c) Who issues payments?

☑ CCDF Lead Agency

☑ TANF agency

Describe.

Currently the CCDF Lead Agency, Office of Child and Family Services issues payments. In the new child care system, the Office for Family Independence will issue payments for the Child Care Subsidy Program (CCSP) in addition to issuing payments for TANF/ASPIRE child care.

☐ Other State/Territory agency.

Describe.

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

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

1.3 Consultation in the Development of the State Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

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

☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:

Three facilitated meetings hosted by the CCAC included representation from local school districts, businesses and community members at-large. As part of these meetings participants worked in small groups to submit written recommendations to the State Administrator and were part of the larger group discussions and information sessions. The State Plan was then distributed to all participants multiple times throughout the editing process.

☑ [REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe:

The Maine Children's Growth Council (MCGC) functions as the State Advisory Council on Early Childhood Education and Care, but does so with significant overlap with the Child Care Advisory Council (CCAC). Consequently, the CCAC avails itself of the MCGC meetings as a forum to share its recommendations for the Lead Agency to consider when drafting the CCDF Plan. In addition, all MCGC members were invited to the three facilitated forums that were hosted by the CCAC; these were open to the public and focused on reauthorization. The Child Care Advisory Council (CCAC) submitted recommendations for the Lead Agency to consider when drafting the CCDF Plan. Two of these forums were facilitated by the Region I State Systems Technical Assistance Specialist. The forums involved a diverse spectrum of stakeholders and many opportunities for participants to express strengths and challenges of the current system as well as strategies for improvement. Participants were given an overview of each of the eight State Plan categories and were able to prioritize specific topics within each category. A final document was submitted to the State Administrator and was utilized extensively in considerations for the State Plan. Stakeholders were encouraged to reach out with ongoing feedback. In addition to the three, CCDF targeted forums, subsequent monthly CCAC meetings involved State Plan-focused discussions.

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

☑ Yes,

☐ No.

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

☑ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes.

Describe, including which Tribe(s) you consulted with

The State Administrator contacted each of the five tribes recognized in Maine: The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, Penobscot Nation, Passamaquoddy Tribe at Indian Township and Passamaquoddy Tribe at Pleasant Point. Each of the tribal CCDF administrators was the primary point of contact. The State Administrator spoke with the tribal CCDF Administrator for the Aroostook Band of Micmac Indians about ways that there could be increased collaboration. The State Administrator sent individual, personalized emails to the tribal Administrators at the point of public hearing and again when the plan was released.

☐ Check N/A if no Indian Tribes and/or Tribal organizations in the State

☑ State/Territory agency responsible for public education.

Describe:

The Department of Education (DOE) holds a seat on the Child Care Advisory Council (CCAC) and participated in the CCAC forums. Additionally, DOE and DHHS participate on the State Agency Interdepartmental Early Learning and Development Team (SAIEL) which provided input and consultation on the State Plan.

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

Describe:

Child Development Services (CDS), Maine's Intermediate Educational Unit that provides both Early Intervention (birth through two years) and Free Appropriate Public Education (for ages three through five years) under the supervision of the Maine Department of Education, holds a seat on the Child Care Advisory Council, the State Agency Interdepartmental Early Learning Team (SAIEL) and participated in the CCAC forums. Additionally, the State Administrator holds seat on the State Interagency Coordinating

Council (SICC) which advises CDS and is actively working with CDS to update the interagency Memorandum of Understanding (MOU).

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

Describe:

The Professional Development Network (PDN), which is administered by the University of Southern Maine System, holds a seat on the Child Care Advisory Council and participated in the CCAC forums, individual meetings, planning sessions, and various joint implementation workgroups and initiatives formed around CCDF reauthorization.

☑ State/Territory agency responsible for child care licensing.

Describe:

The Maine Division of Licensing and Regulatory Services (DLRS) participated in the CCAC forums, individual meetings, planning sessions, and various joint implementation workgroups and initiatives formed around CCDF reauthorization. Various meetings with DLRS were facilitated by Public Consulting Group (PCG) in order to create a child care system redesign as part of the CCDF State Plan.

☑ State/Territory office/director for Head Start State collaboration

Describe:

The Head Start Collaboration Office holds a seat on the Child Care Advisory Council and participated in the CCAC forums. The Lead Agency worked with the Head Start Collaboration Office until December, 2015 at which time Maine elected not to have a federally-funded Head Start Collaboration Office. The Lead Agency now employs a Head Start Coordinator within the Child Care Services Unit who will be a liaison with the Head Start program. Maine Head Start Directors Association presented their collective thoughts and recommendations for the State Plan verbally and in writing. These recommendations were vital in the development of the State Plan.

☑ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

The chair of the Child Care Advisory Council is also the recipient of the EHS-CC Partnership grant in Maine and participated in and co-facilitated all forums and many subsequent CCAC and system planning discussions.

☐ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).

Describe:

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding

support), and childhood obesity prevention

Describe:

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

Describe:

Child Development Services (CDS), Maine's Intermediate Educational Unit that provides both Early Intervention (birth through two years) and Free Appropriate Public Education (for ages three through five years) under the supervision of the Maine Department of Education holds a seat on the Child Care Advisory Council, the State Agency Interdepartmental Early Learning Team (SAIEL) and participated in the CCAC forums. The Center for Community Inclusion and Disability Studies (CCIDS) is Maine's University Center for Excellence in Developmental Disabilities. CCIDS holds a seat on the CCAC, participated in the forums, and many subsequent CCAC and system planning discussions. Additionally, a diverse group of stakeholders came together to discuss the early care and education landscape and to hear a presentation by Help Me Grow.

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

Describe:

Maine Families Home Visiting (the state's MIECHV program) participated in conversations aimed at alignment of services for the State Plan at the State Agency Interdepartmental Early Learning and Development Team (SAIEL) meetings.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

☑ McKinney-Vento State coordinators for Homeless Education.

Describe:

The Lead Agency consulted with the McKinney-Vento State Coordinator on the CCDF State Plan by meeting individually and discussing opportunities for increased collaboration during the plan cycle.

☑ State/Territory agency responsible for public health.

Describe:

The State Administrator met with a representative from the Maine Center for Disease

Control and Prevention to discuss opportunities for increased collaboration within Maine Families Home Visiting during the plan cycle.

☑ State/Territory agency responsible for mental health.

Describe:

The Maine Office of Substance Abuse and Mental Health Services (SAMHS) is responsible for substance abuse services for all ages and for adult mental health services. SAMHS holds a seat on the Child Care Advisory Council and attended the CCAC forums.

☑ State/Territory agency responsible for child welfare.

Describe:

The State Administrator consulted with multiple representatives of child welfare. A workgroup was formed to identify areas to streamline how child welfare children can access CCDF.

☐ State/Territory liaison for military child care programs.

Describe:

☑ State/Territory agency responsible for employment services/workforce development.

Describe:

The Maine Director of Workforce Development came together with all of the Lead Agency Office and Division Directors to discuss child abuse prevention as an issue that spans all programs. National researcher and child abuse prevention expert, Deborah Daro, led the conversation. Child care and the state plan were cited as an opportunity to be built upon.

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

The Maine Office for Family Independence (OFI) is a co-administrator of the CCDF Block grant as well as holds a seat on the Child Care Council, attended the CCAC forums and participated in subsequent planning and implementation meetings. Various meetings with OFI were facilitated by Public Consulting Group (PCG) in order to create a child care system redesign as part of the CCDF State Plan.

☐ State/community agencies serving refugee or immigrant families.

Describe:

☐ Child care resource and referral agencies.

Describe:

☑ Provider groups or associations.

Describe:

The Child Care Advisory Council (CCAC) submitted, in writing, recommendations to consider when drafting the CCDF Plan. A family and center-based provider each hold a seat on the Child Care Advisory Council and they, along with other providers including representation from the Maine Child Care Association (MCCA) and Maine Shared Services Alliance (MSSA), participated in the CCAC forums and subsequent CCAC meetings where the State Plan was discussed.

☐ Worker organizations.

Describe:

☐ Parent groups or organizations.

Describe:

☑ Other.

Describe:

Additional participants in the CCAC forums include:

Maine State Legislators;

Maine Children's Alliance- A non-profit child advocacy organization dedicated to improving the lives of children, youth, and their families;

Maine Children's Trust-The statewide lead in an effort to prevent child abuse and neglect by organizing a strong unified voice that abuse is preventable and to facilitate collaboration to accomplish this goal;

Maine Children's Growth Council (MCGC)-An organization charged to achieve sustainable social and financial investments in the healthy development of Maine's young children and their families.

1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan

(658D(b)(1)(C)).

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 01/08/2016

Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.
The Lead Agency placed the content of the draft State Plan and hearing dates and locations on it's website in addition to posting in major newspapers statewide and distributing via email.

c) Date(s) of public hearing(s): 02/03/2016

Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed A public hearing was held centrally with three remote sites in order to give access to stakeholders in various geographic areas of the state. Written feedback was also accepted for up to ten days following the hearing.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) The State Plan and notice of public hearings were posted on the Lead Agency¿s website and in various local newspapers. An email was sent to all licensed providers and unlicensed providers receiving CCDF funding which directed providers to the website where the draft plan was posted along with the outline for the public hearing dates and process. The same email was sent to all key stakeholders and was circulated by the Child Care Advisory Council members and the Professional Development Network (PDN).

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? Each comment that was received was reviewed, in detail to consider for implementation over the next three years. Several changes were made to the plan as a result of public comments. Public comments and responses were subsequently made available to the public via the Lead Agency¿s website.

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

☑ Working with advisory committees.

Describe:

The Child Care Advisory Council aided in distribution in order to make the plan available to the public.

☐ Working with child care resource and referral agencies.

Describe:

☐ Providing translation in other languages.

Describe:

☑ Making available on the Lead Agency website.

List the website:

http://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html

☑ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

Notification of and a link to the plan and public hearing schedule was sent via email to key stakeholders, licensed and unlicensed providers.

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

Describe:

A convening of stakeholders was held prior to the public hearings to allow key stakeholders to provide feedback and ask questions in an informal manner.

☐ Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

☑ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.).

Describe:

The Lead Agency holds a seat on the State Agency Interdepartmental Early Learning and Development Team (SAIEL) which serves as the administrative governance structure between the Department of Education and the Department of Health and Human Services to ensure interagency coordination, streamline decision-making, allocate resources effectively, incorporate findings from the various demonstration projects statewide, and create long term sustainability for its early learning and development reform. Ongoing coordination with SAIEL will help streamline transitions for children and families by sharing professional development resources, including pre-k in the Quality Rating and Improvement System (QRIS) and providing information and resources to local programs encouraging full day services. Additionally, The Maine Early Learning and Development Standards (MELDS) have been developed by a multidisciplinary team in order to promote smooth transitions for children and families and consistency across early childhood systems including public pre-k, Head Start, child care and Part C and B Section 619 of IDEA. Ongoing consumer education and training

strategies are being developed collaboratively among early care and education providers including the expansion of the scope of use of the Quality Rating and Information System (QRIS). The Early Learning and Development Standards can be found at http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

The State Administrator contacted each of the five tribes recognized in Maine: The Aroostook Band of Micmac Indians, The Houlton Band of Maliseet Indians, Penobscot Nation, Passamaquoddy Tribe at Indian Township and Passamaquoddy Tribe at Pleasant Point. Each of the tribal CCDF administrators was the primary point of contact. The State Administrator spoke with the tribal CCDF Administrator for the Aroostook Band of Micmac Indians about ways that there could be increased collaboration like referring mixed families to the CCSP program as the tribe is unable to serve the whole family. The State Administrator sent individual emails to the tribal Administrators at the point of public hearing and again when the plan was released. The State Administrator will continue to share information about the state CCDF administration and subsidy program application process and also visit the tribes to learn more about tribal CCDF administration and opportunities for further coordination. It is expected that the proposed improvements to the child care subsidy system application process will support more eligible families overall.

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

☑ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.

Describe:

A Memorandum of Understanding (MOU) is being updated between the Lead Agency and Child Development Services, Maine¿s Intermediate Educational Unit that provides both Early Intervention (birth through two years) and Free Appropriate Public Education (for ages three through five years) under the supervision of the Maine Department of Education. The Lead Agency will include Child Development Services information in resource packets sent to participating CCSP families. Child Care Licensing is working with the Center for Community Inclusion and Disability Studies (CCIDS) and the Professional Development Network (PDN) to ensure that providers get needed support around serving children with special needs. The PDN and CCIDS developed the Maine Inclusion Credential, an advanced credential for practitioners serving children with special needs. Ongoing training and technical assistance additions to the PDN allow for the expansion of early childhood education providers who

utilize the consistent and high-quality training practices offered by the PDN. A goal over the next three years is to work with Pre-School teachers, Public Health Nurses (Maine CDC), and Children¿s Behavioral Health providers to allow them to access to this training and TA network. This will lead to increased consistency among providers and support smoother transitions for children and families between systems.

☑ [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act).

Describe:

The Lead Agency will ensure coordination with Head Start through the Early Head Start-Child Care (EHS-CC) Partnership, the OCFS Head Start Coordinator, and The Head Start Directors Association. This collaboration will streamline child care subsidy policies and practices to better support continuity of care for children within these programs with a specific focus on children who are homeless. Additionally, collaboration with the Homeless Youth Outreach Program and the Maine Department of Education (DOE) McKinney-Vento Homeless Liaisons allows for outreach workers to be educated about Child Care Subsidy and refer eligible families who are homeless and are working and/or going to school. Outreach workers are also knowledgeable about Maine¿s Quality Rating and Improvement System (QRIS), the value of high-quality early education, and the preventative impact of its utilization.

☑ [REQUIRED] Early childhood programs serving children in foster care.

Describe:

Maine is working closely with child welfare to ensure that eligible children and families involved in child welfare are being referred to and enrolled in the CCDF program. This promotes an increase in the utilization of high-quality programs for high-risk children and continuity of care for this population. A focus will be placed on analyzing current rules and processes to identify areas that can be strengthened while serving children involved in protective services. Coordination with the child welfare Foster Family Support Specialist will help streamline this process.

☑ State/Territory agency responsible for child care licensing.

Describe:

Child Care Licensing coordinates multiple provider forums across the state each year to share information and bring together providers and resources. These forums support providers to enhance health and safety in the industry. In order to provide ease of access to child care services by parents, coordination with licensing around streamlining the age

categories for children between licensing and subsidy is a collaboration goal.

☑ State/Territory agency with Head Start State collaboration grant.

Describe:

Maine does not have a Head Start Collaboration grant. The Lead Agency¿s Head Start Coordinator will work with Head Start grantees to coordinate Head Start and child care services to meet the needs of families and support continuity of care.

☑ State Advisory Council authorized by the Head Start Act.

Describe:

Maine is embarking on groundbreaking work with federal consultants and state experts and the Maine Children¿s Growth Council (MCGC) who will provide a comprehensive overview, recommendations and implementation support for the full integration of social-emotional health into all areas of early care and education.

☑ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

Regular meetings with Early Head Start-Child Care (EHS-CC) grantees are underway in order for ongoing assessment of state practices and policies that support or hinder program implementation with a goal of identifying and removing barriers and building partnerships in order to keep at-risk children in high-quality programs with minimal disruption.

☑ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons

Describe:

The Lead Agency will coordinate with Maine Department of Education (DOE) McKinney-Vento Homeless Liaisons to allow for outreach workers to be educated about Child Care Subsidy and refer eligible families who are homeless and are working and/or going to school.

☐ Child care resource and referral agencies.

Describe:

☑ State/Territory agency responsible for public education.

Describe:

The Department of Education (DOE) is the recipient of the Pre-K Expansion Grant. Regular meetings and discussions with the Lead Agency have allowed for innovation and planning around building a coordinated system for all children. A focus of the group in the coming

years will be a cross-system data review of early childhood interventions and their lasting impacts. SAIEL is the governance structure by which this coordination and system change takes place.

☑ State/Territory institutions for higher education, including community colleges.
Describe:
The Lead Agency holds a seat on the Higher Education Committee which focuses on building and supporting the early care and education workforce.

☑ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).
Describe:
The Lead Agency is responsible for CACFP administration. The State Administrator oversees coordination and streamlining between programs in order to best support providers and children.

☑ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention.
Describe:
A goal over the next three years is to work with Pre-School teachers, Public Health Nurses (Maine CDC), WIC providers and Children¿s Behavioral Health providers to allow them to access to this training and TA network and Child Care Subsidy Program materials. This will lead to increased consistency among providers and support smoother transitions for children and families between systems.

☑ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.
Describe:
The Lead Agency will continue work with Child Development Services, Maine¿s Part C and B Section 619 of IDEA, along with the Department of Education who serves school-age youth programming. An MOU will be developed to streamline referrals and data-sharing. This will ensure an increased number of eligible children are referred for early intervention services.

☑ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.
Describe:
Through SAIEL, collaboration with home visiting enhances and aligns services and linking of

high-quality services to eligible families without duplication. A specific focus on developmental screening ensures that there is a comprehensive, integrated system in which screening is done at appropriate intervals for all children and necessary referrals are made. Additionally, Maine¿s Professional Development Network (PDN), Maine Road¿s to Quality (MRTQ), will work with Maine¿s Center for Disease Control and Prevention (CDC) as part of their Physical Activity and Nutrition (PAN) Council to update curricula in the areas of health and safety.

☑ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

Through SAIEL, collaboration with EPSDT focuses on developmental screening initiatives, reducing duplication, and increasing referrals and information sharing. The focus is on building a comprehensive, integrated system in which screening is done at appropriate intervals for all children and necessary referrals are made to Child Development Services or other appropriate interventions.

☑ State/Territory agency responsible for public health.

Describe:

The Lead Agency collaborates with the Maine Center for Disease Control and Prevention (CDC) which is a unit within the Maine Department of Health and Human Services to include a focus on safe sleep environments for all children in all settings. Consistent messaging is developed and disseminated by all partners in order to reduce SIDS and unsafe sleep related deaths. This work is part of the Collaborative Improvement & Innovation Network (CoIIN) which aims to reduce infant mortality. Through this model participants learn from one another and national experts, share best practices and lessons learned, and track progress toward shared benchmarks.

☑ State/Territory agency responsible for mental health.

Describe:

The Lead Agency is responsible for mental health services. Coordination with mental health services will be vital to ensure that families and children have continuity of support between child care and home settings. This coordination includes shared training and streamlined referral processes.

☑ State/Territory agency responsible for child welfare.

Describe:

The Lead Agency is responsible for child welfare services. Ongoing coordination with the child welfare Resource Family Support Specialist and child welfare social workers will ensure that eligible children are referred to the Child Care Subsidy Program and high-quality providers serving children in the child welfare system will receive the quality bump. This will make access to the system easier and more streamlined for families and providers while incentivizing quality.

☐ State/Territory liaison for military child care programs.

Describe:

☑ State/Territory agency responsible for employment services/workforce development.

Describe:

Collaboration with the Maine Department of Labor (DOL) Career Centers statewide is vital in order to ensure eligible families are accessing Child Care Subsidy services in order to enter and remain as part of the workforce.

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

In the new child care system the DHHS Child Care Policy Oversight Team will be focused on system changes to better align the child care industry as a whole including prospective payments made directly to providers and the utilization of standard provider agreements across child care programs regardless of the funding stream. As part of the new child care system, the TANF Lead Agency will co-administer the CCDF Block Grant and manage eligibility, attendance, payment and monitoring for Child Care Subsidy Program and TANF/ASPIRE child care assistance programs.

☑ State/Territory community agencies serving refugee or immigrant families

Describe:

The Lead Agency is responsible for the administration of medical and cash supports for refugee and immigrant families. In addition, Child Care Licensing is utilizing translators during training sessions to increase the capacity and accessibility of refugee and immigrant families to comply with licensing and regulatory requirements. In order to ensure training delivery to all counties and interested parties statewide Maine Roads to Quality trainers, in specific areas such as those with tribal lands or English language learners, learn the culture and communities in which they train. If trainers need assistance meeting the community need, translators and/or community members are asked to assist in training delivery to make it applicable and valuable for all. An ongoing focus will be put on making training, forms and

resource materials available in various languages.

☑ Provider groups or associations.

Describe:

Ongoing work with provider groups is vital to ensuring that program policies and practices are such that families receiving CCDF can access high-quality care with ease. The Lead agency has designated a position to provide regular communication with providers and seek input from advocate groups and organizations. An ongoing focus will be placed on partnering with providers as well as organizations that represent providers including, but not limited to, the Maine Shared Services Alliance, the Maine Child Care Association, Communities of Practice, and the Maine Head Start Directors Association.

☐ Worker organizations.

Describe:

☑ Parent groups or organizations.

Describe:

Working with organizations that represent parents is vital in ensuring effective consumer education practices. Staff within the Lead Agency will be responsible for communicating with parents and seeking input from advocate groups and organizations. An ongoing focus will be placed on partnering with parents as well as organizations that represent parents including, but not limited to, Maine Alliance of Family Organizations (MAFO) and G.E.A.R. Parent Network and Maine Parent Federation in order to ensure effective communication with parents and across systems.

☑ Other.

Describe:

As part of the new child care system, Maine is creating an internal DHHS working group called the DHHS Child Care Policy Oversight Team which is staffed out of the DHHS Commissioner¿s Office in order to ensure sustainability. The Maine DHHS Child Care Policy Oversight Team will be comprised of DHHS staff from multiple DHHS offices that support the child care infrastructure. This group is created in order to maintain internal communication among state programs, avoid siloed approaches and share child care information with the Commissioner¿s office. The primary duties of the DHHS Child Care Policy Oversight Team include:

- Making final policy decisions on state child care system
- Retaining full authority to approve or not approve changes to the child care system
- Ensuring collaboration between DHHS offices

The Child Care Advisory Council will continue to advise the Legislature and Department regarding child care services in the state and will be comprised of diverse stakeholders in accordance with statute. CCAC recommendations will be considered and may be approved for implementation by the DHHS Child Care Policy Oversight Team.

1.5 Optional Use of Combined Funds

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

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

☐ Yes, If yes, describe at a minimum:

How do you define "combine"

Which funds will you combine

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

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

How are the funds tracked and method of oversight

☑ No.

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level - State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service

delivery systems for child care and development services and to increase the supply and quality of child care services.

State funds were coupled with private funds from the John T. Gorman Foundation in order to create the Maine Roads to Quality (MRTQ), Professional Development Network Accreditation program and to deliver the Center for the Study of Social Policy (CSSP) Strengthening Families curriculum to child care providers. The goal of the Accreditation program is to improve the quality of early care and education for children in Maine by increasing the number of accredited family child care providers, child care centers, part day programs, and school age programs. CCDF funds are used to support infrastructure and implementation of the project while private funds were used to give providers access to mini-grants that remove barriers to accreditation and to provide funding to pay the fees for accreditation to the national accrediting bodies.
The Strengthening Families Project is administered by the Maine Children's Trust and MRTQ.
The John T. Gorman Foundation funded training in the protective factors and CCDF funds are used to administer this training to child care providers across the state.
CCDF funds are used as match funds for the CS Mott Foundation grant that funds the Maine Afterschool Network, which works to increase the supply and quality of out-of-school-time programming for children.
Additionally, the Lead Agency is providing in-kind contributions in the form of CCDF-funded staff time and combining with, contingent upon funding award selection, Federal Grant funds from the National Institute of Health and the Pennsylvania State's Center for the Protection of Children to conduct research on and implement the iLook Out for Child Abuse Project in Maine. iLook Out is an innovative online learning module designed specifically for child care providers to learn about and meet the requirements for mandated reporting. Ultimately, Maine will have unlimited access to this groundbreaking training and child care providers will be prepared and confident in their mandated reporter requirements which aligns with the CCDBG reauthorization goals and requirements.
Maine Shared Services Alliance is a statewide effort designed to strengthen the early care and education industry through the development of local or regional Shared Service Alliances. By participating in a shared services alliance, early care and education businesses seek to become stronger, more accountable, more financially sound and efficient, and better equipped to offer affordable, high-quality services for children and their families. MSSA has an Advisory Council made up of approximately 15 stakeholders, including state system representatives, providers and other community members.
Finally, Maine is embarking on work with federal consultants and state experts and the Maine Children's Growth Council (MCGC) who will provide a comprehensive overview, recommendations and implementation support for the full integration of social-emotional health into all areas of early care and education. CCDF funds will be combined with state and private funds for full support of this project.

1.7 Coordination with Local or Regional Child Care Resource and Referral

Systems

States may use funds to support or establish Child Care Resource and Referral (CCR&R systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

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

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

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

☐ Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4.

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

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

1.8 Disaster Preparedness and Response Plan

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

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

1.8.1 Describe the status of State's Statewide Child Care Disaster Plan.

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

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions

only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The draft Statewide Child Care Annex is being developed in collaboration with Maine Emergency Management Agency (MEMA) and the Maine Public Health Emergency Preparedness Program (PHEP). The Child Care Annex will be part of the Maine Emergency Support Function (ESF) 6 and outlines the scope of work to be executed by DHHS Offices OFI, DLRS, and OCFS before, during, and after a disaster in order to support Maine's child care infrastructure. The statewide disaster plan, overseen by the state administrators, outlines the duties of the three primary divisions within the Lead Agency that are act to support the child care infrastructure. There is focus on preparation, response and recovery.

Additionally, Individual Disaster Planning Guide, Y.I.K.E.S. your Inventory for keeping everyone safe, is made available to providers online and in print. Technical assistance is available to help providers create individualized plans in order to prepare, respond, and recover from a disaster. This TA includes access to the Maine Child Care Health Coordinator. The Y.I.K.E.S. individual disaster planning guide was updated in 2015 by a multidisciplinary team to include procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities and chronic medical conditions. Y.I.K.E.S. is made available to all providers. CCDF providers and all licensed providers, with the exception of relatives, will be required to have an emergency response plan that is updated annually.

Unmet requirement - Identify the requirement(s) to be implemented Guidelines for continuing CCDF assistance and child care services after a disaster (which may include provision of temporary child care, and temporary operating standards for child care after a disaster)

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

The statewide Child Care Annex is in draft form and continues to undergo revisions, editing and review.Finalize statewide Child Care Annex, obtain final approval and implementation.

Projected start date for each activity: 08/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
<u>DHHS-Office of Child and Family Services</u>

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Division of Licensing and Regulatory Services & DHHS-Office for Family Independence

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. 1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
   - a) the availability of child care assistance,
   - b) the quality of child care providers (if available),
   - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
   - d) Individuals with Disabilities Education Act (IDEA) programs and services,
   - e) Research and best practices in child development, and
   - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
   - 2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
   - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
   - b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
   - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

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

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

2.1.1 Describe how the State/Territory informs families of availability of services.

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

The Lead Agency reviews county level information showing the number of families being served by CCDF. This data is cross-referenced with income and population-level data to determine areas of need. Additionally, the Child Care Advisory Council reviews data from each of the state offices that supports the child care infrastructure along with the QRIS and Professional Development Network data in order to assess areas of strength and needs and make recommendations to the legislature and the Department.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

The diverse members of the Child Care Advisory Council (CCAC) aid with outreach and education in their respective areas of expertise. Additionally, Child Care Licensing, the Professional Development Network, Child and Adult Care Food Program (CaCFP), and public assistance eligibility workers provide education regarding Child Care Subsidy in an effort to educate and refer eligible children and families who need child care in order to work or go to school. In-person training on the scope of the Child Care Subsidy Program is available to the community and interested stakeholders.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?

The Lead Agency utilizes strategies that build on internal and external resources to identify and enroll eligible families. Child Care Subsidy Program information is shared with child welfare, children's behavioral health, public assistance eligibility workers, housing authority and child care licensing staff which all act as system access points for low-income and at-risk families. The Lead Agency's website is used for electronic outreach and education . The Lead Agency plans to partner with the Maine Early Learning Investment Group (MELIG) as well as a variety of other community partners to create a coordinated campaign for consumer education and outreach. The Lead Agency will create materials to distribute to parents and partners relating to Child Care Subsidy.

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

☑ Electronically via online application, mobile app or email.

Provide link https://www1.maine.gov/benefits/account/login.html

☑ In-person interview or orientation.

Describe agencies where these may occur:

In-person interviews are not required but can happen at any one of 16 Office for Family Independence district offices that span the state.

☐ Phone

☑ Mail

☐ At the child care site

☐ At a child care resource and referral agency.

☑ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:

58 Kiosks are located at the 16 Office for Family Independence (OFI) district offices placed around the state. Each kiosk features access to My Maine Connection, the online benefits application, and a full-size printer and document scanner for uploading paystubs, birth certificates and any other necessary verification. Scanned documents are automatically added to a client's application package and sent to OFI via a fast and secure connection.

☑ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:

Parents are able to apply for multiple benefits through one process including TANF, health care, food supplements, ASPIRE and child care. They are able to do this at a kiosk, in person, online, or by downloading an application online and mailing it in.

☑ Other strategies.

Describe:

Parents may get assistance from community providers, advocates and/or child care providers in the child care subsidy application process. As part of the new child care system the Lead Agency will focus on ensuring the application process is seamless and streamlined for families.

2.2 Consumer Education Website

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

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

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

☑ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut

and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

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

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

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public

Information and resources about choosing child care is available on the Lead Agency's website along with the Child Care Choices consumer education website.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

58 Kiosks are located at the 16 Office for Family Independence (OFI) district offices placed around the state. Each kiosk features access to My Maine Connection. The My Maine

Connection "home page" includes a quick link to Maine's child care consumer education website, Child Care Choices. Written, verbal, and electronic resources on choosing child care are available to parents, providers and to the general public. These resources include a list of various child care options in Maine, a list of questions to ask when interviewing a provider, health and safety considerations along with access to provider's licensing histories, quality rating information, parent's rights and responsibilities, considerations when choosing child care for children with special needs along with many other national resources.

c) Describe who you partner with to make information about the full diversity of child care choices available

Many state and community partners disseminate information about choosing child care. These partners include: Child Care Licensing, public assistance eligibility staff through the Office for Family Independence, the Professional Development Network, Child Care Advisory Council, University of Maine System, and the Lead Agency's Prevention team.

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

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

Maine maintains a comprehensive Quality Rating and Improvement System (QRIS). Quality for ME is a four-step program designed to increase awareness of the basic standards of early care and education, to recognize and support providers who are providing care above and beyond those standards, and to educate the community of the benefits of higher quality care. A revision project of the Quality for ME system, currently underway, will include a re-branding and marketing effort to establish greater visibility of Maine's QRIS and the benefits of choosing high-quality care. Child Care Subsidy staff are available to answer questions parents have when searching for child care and are trained to provide referrals to programs. Additionally, recipients are educated about QRIS and directed to the consumer education website to use to aid them in making an educated decision about child care. The Professional Development Network (PDN), Maine Roads to Quality, administers various programs that aid providers in reaching accreditation and informing parents and the general

public about the value of choosing an accredited program.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Information about Maine's QRIS is provided via direct communication and written materials. A QRIS booklet, a parent tip sheet, and multiple descriptions of the QRIS are available at a variety of web sites including the consumer education website, childcarechoices.me, the Maine Roads to Quality (MRTQ) website, the Lead Agency's website and many other community provider sites. Information about the value of utilizing accredited providers is shared through the professional development website, newsletters, technical assistance requests and MRTQ Communities of Practice where providers convene in their respective areas of the state and learn together with the assistance of a MRTQ trainer. These diverse methods aim to share valuable information about quality child care in various ways to accommodate many consumer populations, abilities, and learning styles.

c) Describe who you partner with to make information about child care quality available

Information about accreditation and the Quality Rating and Improvement System (QRIS) is disseminated through the Professional Development Network, eligibility specialists, Child Care Licensing, the Child Care Advisory Council, and income tax professionals. Another method that is used to provide education to providers and parents on quality settings is the Maine Early Learning and Development Standards (ELDS) document and trainings.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

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

a) Temporary Assistance for Needy Families (TANF)

By having the TANF Lead Agency as the CCDF Block Grant co-administrator Maine has designed a streamlined way for families to access child care along with many other public assistance programs. This single point of access for all public benefits allows for families to

be screened for eligibility and educated about many programs at one time. When a family applies for child care, they are also screened and educated about TANF, ASPIRE, health care, and food supplements in an effort to better support family independence.

b) Head Start and Early Head Start Programs

The Lead Agency's website provides information about Head Start and Early Head Start programs including the Head Start locator, needs assessment, and the Head Start Early Learning Outcomes Framework. Additionally, users of Maine's consumer education website, childcarechoices.me, can find all types of providers, by searching by zip code, city, and address, which turn up results that can include Head Start providers.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. LIHEAP program information is available on the Lead Agency's website in an effort to better support family independence.

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

By implementing a single point of access for all public benefits, families are screened for eligibility and educated about many programs at one time. When a family applies for child care, they are also screened and educated about TANF, ASPIRE, health care, and food supplements as a way to better support family independence.

e) Women, Infants, and Children Program (WIC)

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. WIC program screening and referral information is available on the Lead Agency's website in an effort to support family independence.

f) Child and Adult Care Food Program(CACFP)

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. CaCFP program information, forms and instructions are available on the Lead Agency's website.

g) Medicaid

By implementing a single point of access for all public benefits, families are screened for eligibility and educated about many programs at one time. When a family applies for child care, they are also screened and educated about TANF, ASPIRE, health care, and food

supplements in order to support family independence.

h) Children's Health Insurance Program (CHIP)

By implementing a single point of access for all public benefits, families are screened for eligibility and educated about many programs at one time. When a family applies for child care, they are also screened and educated about TANF, ASPIRE, health care, and food supplements in order to support family independence.

i) Individuals with Disabilities Education Act (IDEA)

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. Child Development Services and Department of Education program and referral information is available on the Lead Agency's website. The Lead Agency will include Child Development Services information in resource packets sent to participating CCSP families.

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

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. A link to Pre-k program information is available on the Lead Agency's website.

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

The Lead Agency's website includes the spectrum of resource information for Maine families in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. Maine Families Home Visiting program (the state's MIECHV program) information is available on the Lead Agency's website.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.

For example, does the State/Territory provide information to providers through CCR&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. TANF program information is available on the Lead Agency's website and is shared through provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

b) Head Start and Early Head Start Programs

The Lead Agency's website provides information about Head Start and Early Head Start programs including the Head Start locator, needs assessment, and the Head Start Early Learning Outcomes Framework. Additionally, users of Maine's consumer education website, childcarechoices.me, can find all types of providers, by searching by zip code, city, and address, which turn up results that can include Head Start providers. Head Start information is also shared through the PDN, MRTQ, provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. LIHEAP program information is available on the Lead Agency's website and is shared through provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

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

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. SNAP program information is available on the Lead Agency's website and is shared through provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

e) Women, Infants, and Children Program (WIC)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. WIC program screening and referral information is available on the Lead Agency's website and is shared through provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

f) Child and Adult Care Food Program(CACFP)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. CaCFP program

information, forms and instructions are available on the Lead Agency's website. CaCFP information is also shared through Child Care Licensing and the PDN, MRTQ, provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

g) Medicaid

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. Health care program information is available on the Lead Agency's website and is shared through provider forums, listservs, emails and Communities of Practice (CoPs).

h) Children's Health Insurance Program (CHIP)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. Health care program information is available on the Lead Agency's website and is shared through provider forums, listservs, emails and Communities of Practice (CoPs).

i) Individuals with Disabilities Education Act (IDEA)

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. Child Development Services program and referral information is available on the Lead Agency's website. Child Development Services information is also shared through the PDN, MRTQ, provider forums, listservs, emails and Communities of Practice (CoPs) and trainings. The Lead Agency will include Child Development Services information in resource packets sent to participating CCSP families.

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

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip sheets, printable documents, phone numbers, and program descriptions. A link to Pre-k program information is available on the Lead Agency's website. Pre-K program information is also shared through the PDN, MRTQ, provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

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

The Lead Agency's website includes the spectrum of resource information for providers in need of health and human services. Resource information is provided in the form of links, tip

sheets, printable documents, phone numbers, and program descriptions. Maine Families Home Visiting program information is available on the Lead Agency's website. Maine Families Home Visiting Program information is also shared through the PDN, MRTQ, provider forums, listservs, emails, Communities of Practice (CoPs) and trainings.

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

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public

Information about child development is available through the Professional Development Network's newsletter, technical assistance services, training and website. Additionally, child development information is available on the Lead Agency's website, through CaCFP materials, through the Department of Education, SAIEL and through various other community partners.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

The 2015 Maine Early Learning and Development Standards (MELDS) are available in electronic format on various websites including the Department of Education, The Lead Agency and Maine Roads to Quality. MELDS training is available online and in-person to aid early childhood practitioners in understanding child development and the integration of social and emotional health, cognitive, and physical development. The Developmental Systems Integration (DSI) Project, which includes participation from the State Administrator, improves developmental screening rates and reduces duplication across the early childhood system.DSI through Maine Quality Counts makes training and technical assistance on child development available to community partners. DSI will apply for funding from the Association of Maternal and Child Health Programs (AMCHP) to purchase and disseminate materials to child care providers. These materials were developed from "Learn the Signs. Act Early" (LTSAE) and were crafted with Maine contact information to promote the message of the

importance of understanding developmental milestones and developmental screening. The Maine Children's Trust educates parents on child development through parent education, the Child Abuse and Neglect Prevention Councils and Maine Families Home Visiting services.

c) Describe who you partner with to make information about research and best practices in child development available

Partners in disseminating information on research and best practices in child development include Maine Roads to Quality, Maine Children's Alliance, Maine Children's Growth Council, Maine Children's Trust, 2-1-1 Maine, the Center for Community Inclusion and Disability Studies, Child Care Licensing, SAIEL, Maine Department of Education-Child Development Services, Child Care Advisory Council, Maine Quality Counts, Public Health Nursing and Maine Families Home Visiting.

2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

Information on best practices and messaging related to social-emotional health in early childhood settings is made available to parents via the Lead Agency's website along with the websites of community partners and of the PDN, The Center for Community Inclusion and Disability Studies (CCIDS), The Maine Children's Alliance, The Maine Association for Infant Mental Health, The Maine Children's Trust, The Maine Resilience Building Network and The Maine Children's Growth Council. Among some of the resources available are The Growing Ideas Tip sheets, Early Learning and Development Standards (MELDS), Watch Me Grow Booklets, The Pyramid Model for Supporting Social Emotional

Competence in Infants and Young Children, The Legacy for Children Intervention, Strengthening Maine Families, Touchpoints, The Developmental Assets and protective and promotive factors.

ii. Providers

Providers are made aware of social-emotional health and early childhood mental health practices through a variety of venues. The Professional Development Network, MRTQ, is integral in disseminating and supporting providers in order to address each child's social-emotional, physical and intellectual development. All curricula developed by the PDN are built upon core knowledge areas which include principles of how to create a quality program to meet the social emotional needs of all children. Additionally, MRTQ has created an Inclusion Credential which addresses, in more depth, the skills a practitioner needs to care effectively for children with special needs, including those with social-emotional or mental health needs. The 2015 revised Maine Early Learning and Development Standards (MELDS) stress the importance of social-emotional health in each interaction with a child. The revised training for providers on the new MELDS showcases social-emotional learning in each activity and module. A variety of other strategies are used by the PDN to share information with providers on the importance of social emotional health in early childhood settings. These strategies include partnering with the Center for Community Inclusion and Disability Studies (CCIDS) to provide an Inclusion Credential, direct technical assistance to providers including support for the Communities of Practice, early childhood mental health consultation, Growing Ideas Tip sheet, responding to requests from Child Care Licensing and a virtual tool kit. Also MRTQ partners with the Maine Association for Infant Mental Health to deliver core knowledge training to providers called "Introduction to Infant Mental Health: Issues and Practice."

iii. General public

Information on best practices and messaging related to social-emotional health in early childhood settings is made available to the general public via the Lead Agency's website along with the websites and community partnerships of the PDN, CCIDS, The Maine Children's Alliance, The Maine Association for Infant Mental Health, The Maine Children's Trust, The Maine Resilience Building Network and The Maine Children's Growth Council. Among some of the resources available are positive behavioral interventions and supports, evidence-based social-emotional programs, child development resources and early childhood mental health consultation research.

b) Describe any partners used to make information regarding social-emotional/behavioral

and early childhood mental health of young children available

The Joint Standing Committee on Education and Cultural Affairs Committee of the Maine legislature requested that the Maine Children's Growth Council and the Maine Department of Education collaborate to establish an ad hoc committee to examine the social emotional learning and development of Maine's young children from birth through grade two. The ad hoc committee includes representatives from the Maine Children's Growth Council; the Department of Education; the Department of Health and Human Services; organizations that promote child welfare, children's mental health and early childhood advocacy; persons with experience in Medicaid benefits; and a pediatrician. In addition, other interested stakeholders are engaged in this process, including legislators, child care and Head Start providers, a parent of a child with disabilities, and representatives from higher education institutions. Because Maine does not yet have state-level policies, the U.S. Departments of Health and Human Services and Education Policy Statement on expulsion and suspension policies in early childhood settings is made available. It is the intention of the Maine Children's Growth Council to make recommendations to the legislative Joint Standing Committee on Education and Cultural Affairs Committee regarding guidance on preventing expulsion of children from birth through grade two in licensed early care and education programs. At present, the Council is considering a cross-sector approach to develop guidance applicable across all licensed early care and education settings (e.g. child care, public preschool programs, special education settings) that could be implemented through a variety of strategies. The Council is also exploring opportunities to build cross-systems supports that enhance the capacity of early childhood professionals to promote young children's healthy social emotional development and effectively manage serious and persistent challenging behaviors.

The Council will base its recommendations on:

1) Maine-specific current policies and data that is being gathered through a statewide survey on voluntary and involuntary dismissal of young children in early care and education settings;

2) A summary of the research on best practices (e.g. U.S. Departments of Health and Human Services and Education Policy Statement on expulsion and suspension policies in early childhood settings; and

3) Exemplars of federal policies (e.g. Head Start Notice of Public Rulemaking) and other states' policies and implementation strategies.

The Lead Agency will subsequently consider recommendations based on evidence and best practice to support the goals of the state plan relating to continuity of care for children.

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

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

☐ Yes.

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

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

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

☑ No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

Describe the status of the State/Territory's procedures for providing information on and

referring families to existing developmental screening services.

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

List the Lead Agency policy citation(s) and:

10-144 Chapter 101: MaineCare Benefits Manual, Chapter II; Section 94: Early and Periodic Screening, Diagnosis and Treatment Services.

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

The Child Development Services system is an Intermediate Educational Unit that provides both Early Intervention (birth through two years) and Free Appropriate Public Education (for ages three through five years) under the supervision of the Maine Department of Education. The CDS system ensures the provision of special education rules, federal and state regulations statewide, through a network of regional sites. CDS consists of nine regional sites and a state office. The state CDS office maintains a central data management system, system-wide policies and procedures, and provides centralized fiscal services for regional CDS sites. Regional CDS sites provide case management and direct instruction for families with children from birth through age five. Each site conducts Child Find, which is the process of identifying children with disabilities. Screenings and evaluations are provided in order to identify children who are eligible for services. Regional CDS sites arrange for local services that include early intervention and special education and related services. In 2013, the Developmental Systems Integration (DSI) Steering Committee, a subcommittee of the State Agency Interdepartmental Early Learning and Development team (SAIEL), began a multidisciplinary initiative to improve the rates of developmental screening for children ages birth to age three. The DSI Steering Committee, which is attended by the State Administrator, CDS, and many other partners, recommended that children in Maine be developmentally screened, according to the American Academy of Pediatrics recommendations at the critical ages of 9, 18 and 24 or 30 months and should also be screened for autism at 18 and 24 months. Also, the DSI Steering Committee recommended that evidence-based developmental and autism screening tools be used when screening children at these critical ages. The recommended tools for developmental screenings are the *Ages and Stages Questionnaire-3* or the *Parents' Evaluation of Developmental Status.* The recommended tool for autism screening is the *Modified Checklist for Autism in Toddlers.* Training and technical assistance for child

health care providers on the importance of developmental and autism screening, including ways to build these tools into the office workflow, has been and continues to be a focus to promote developmental screening.

The DSI Steering Committee is also exploring Help Me Grow as a model to support early childhood program linkages, reduce duplication of screenings and advance early detection. The full analysis of Help ME Grow will also include the ways in which this system can support families to be linked up with appropriate child care settings.

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

T he Lead Agency will include Child Development Services and EPSDT information in resource packets sent to participating CCSP families. The DSI initiative is made up of service providers receiving both DHHS and DOE funding, including Home Visiting programs, Early Head Start, Child Development Services, Public/Community Health Nursing, child care and medical providers receiving Medicaid funding. Together, these service providers are raising awareness with families of the importance of developmental screening in identifying needs early before a child enters school. The critical ages (9, 18, and 24 or 30 months old) for screening along with information on developmental milestones is being promoted in settings where children and families receive services. Consistent messaging among service providers has and remains a focus to ensure that all Maine families are aware and can advocate for early developmental screening. Materials developed by the CDC's "Learn the Signs. Act Early" campaign (http://www.cdc.gov/ncbddd/actearly/) have been reproduced with Maine contact information and will be disseminated widely to many service providers, including child care providers, to promote family awareness. DSI will apply for funding from the Association of Maternal and Child Health Programs (AMCHP) to purchase and disseminate these materials to more child care providers.

The DSI Steering Committee has also developed a universal consent process for sharing developmental screening, despite the results, in order to avoid duplicate screenings as well as recommendations on referrals to Early Intervention services, if indicated. Improving coordination and communication among service providers is another focus of the DSI Steering Committee to better identify and serve children and their families at a young age.

Additionally, Maine Roads to Quality hired a Child Care Health Coordinator to lead the change on professional development as it relates to developmental screening, adverse

childhood experiences and building capacity and access to a Child Care Health Consultant Network (CCHC) Network statewide.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with to complete implementation of this activity

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint

A parental complaint regarding a child care provider is substantiated for a violation of a rule

when subsequent investigation by an assigned Child Care Licensing Specialist (CCLS) reveals a preponderance of evidence that the provider has failed to meet the requirement set forth in the rule. Complaint investigations, regardless of the initial referent, are all handled in the same manner.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

Records of substantiated parental complaints are maintained in the form of Statements of Deficiencies that are issued to providers subsequent to the completion of investigations. The paper copies of these complaints are maintained in provider files, electronically they are kept within the provider database (Maine Automated Child Welfare Information System, or MACWIS), and they can also be located in .pdf format on the Child Care Choices website. There records are maintained in perpetuity.

c) How does the State/Territory make substantiated parental complaints available to the public on request

Statements of Deficiencies pursuant to investigation of complaints and approved plans of correction are available to the general public at any time on the Child Care Choices website.

d) Describe how the State/Territory defines and maintains complaints from others about providers

The Division of Licensing and Regulatory Services is the agency assigned responsibility for pursuing complaints regarding child care providers. Complaints are defined as alleged rule violations or allegations of child abuse and/or neglect. There are specific definitions and criteria distinguishing the two thresholds. Rule violations are investigated by Child Care Licensing Specialists (CCLS) and are maintained in the MACWIS system as part of the child care provider's permanent record. Allegations of child abuse and/or neglect are investigated by an assigned investigator from the Division's Out of Home Investigations Team and are assisted by the CCLS assigned to the provider. Maine law requires that unsubstantiated investigations of child abuse and/or neglect be expunged from MACWIS eighteen months from the close of the investigation, if no additional complaints have been received during that timeframe.

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

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

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

Applications are accepted at local Department of Health and Human Services offices across the state where interpreter services are available at no cost to individuals in order to provide meaningful access to all Department programs, benefits and services. Each of the local offices are required to proactively informs individuals with limited English proficiency that assistance is available to them.

- [ ] None

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

The Lead Agency has the ability to translate in all primary and secondary languages.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

The Lead Agency is responsible for programs and benefits for individuals with disabilities. Two parent families where one parent is working, going to school or attending a job training program and the other parent has a disability are eligible for Child Care Subsidy and children

with special needs receive a priority on the waiting list. The State Administrator holds seat on the State Interagency Coordinating Council (SICC) which advises Maine's part C and B Section 619 of IDEA and is actively working with CDS to develop an interagency Memorandum of Understanding (MOU). Staff are available to assist with paperwork and make other necessary accommodations for individuals with special needs.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

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

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

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

Provide the link to the website: http://www.childcarechoices.me/SearchForChildcare.aspx

and describe how the consumer education website meets the requirements to:

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

The Child Care Choices website allows consumers to look up licensing details by provider. License histories, violations, written notification letters, and corrective action plans are available to be viewed by the public.

b) Include a description of health and safety requirements and licensing or regulatory

requirements for child care providers. Describe

Child Care Licensing regulatory requirements are easily accessible on the website and are available to be downloaded, viewed, and saved by consumers.

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

Frequently asked questions on the consumer education website are focused on licensing information and help consumers understand processes for licensing, background checks, monitoring, and offenses that prevent individuals from being approved as providers.

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

Data is available on the Child Care Choices website in an easy-to-understand format. The data points include number of deaths, serious injuries, and substantiated incidences of child abuse that occurred in child care settings.

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

The website allows consumers to search for providers by zip code, city, and address. Additional filters are available including QRIS rating, type of provider, and ages served. A full site search feature is available as well as frequently asked questions, definitions, a color-coded legend, program types and concrete examples along with plain language throughout.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

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

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents" options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements - and the opportunity for children to form trusting relationships with teachers - are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not

disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child includes that a family's assets may not exceed $1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

In order to be eligible for services, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size, and whose family assets do not exceed $1,000,000 (as certified by a member of such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves childrenfrom 6 weeks (weeks/months/years) to 12 years (through age 12).

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

☑ Yes, and the upper age is 18 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity: means a condition that affects the ability of children to care for themselves. Children who have a physical or mental incapacity are physically or mentally incapable of caring for themselves. Physical or mental incapacity must be diagnosed by a qualified professional or be court determined.
☐ No

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

☑ Yes and the upper age is 18 (may not equal or exceed age 19)
☐ No.

3.1.2 How does the Lead Agency define the following eligibility terms?

a) residing with -

means the child is living with the applicant who is maintaining a home or main domicile for the child.

b) in loco parentis -

as used in these rules means any relative with custody (whether or not court ordered) or any person with court-ordered custody.

3.1.3 Eligibility Criteria Based on Reason for Care

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

* working:

Employed means gainful work that produces earned incomes from wages, salaries, commissions, fees, tips, piece rate payments, or self-employment in one's own business, professional enterprise partnership or farm. If there are two (2) Parents in the home, both must be Employed or attending an Educational or Job Training Program or one parent must show documentation of incapacity or disability which renders him/her unable to care for the child(ren) and unable to work or attend an Educational or Job Training Program.

* attending job training

Attending a job training means a person is enrolled and attending at least half time at vocational training, field training, on-the-job training and other recognized job readiness training programs focused upon the acquisition of knowledge and skills that prepare the participant for employment. If there are two (2) Parents in the home, both must be Employed or attending an Educational or Job Training Program or one parent must show documentation of incapacity or disability which renders him/her unable to care for the child(ren) and unable to work or attend an Educational or Job Training Program.

* attending education

Attending an educational program means a person is enrolled and attending at least half

time a program at an elementary or secondary educational institution, a program that provides for completion of a secondary diploma or HiSET (High School Equivalency Test), or any other approved high school equivalency test, vocational education program, or post-secondary undergraduate institution in which the parent is matriculating credits toward a degree. Parents must be enrolled in at least six credits per semester and attend classes either in person or by computer. If there are two (2) Parents in the home, both must be Employed or attending an Educational or Job Training Program or one parent must show documentation of incapacity or disability which renders him/her unable to care for the child(ren) and unable to work or attend an Educational or Job Training Program.

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)?

☑ Yes.

☐ No.

If no, describe additional requirements

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

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

1) Definition of protective services -

means specialized casework services to neglected, abused, or exploited children and their families. For the purposes of subsidy services, protective services include open child protective cases and children in care and custody.

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

☐ Yes.

☑ No.

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

☐ No.

3.1.4 Eligibility Criteria Based on Family Income

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

* Definition of income -

Gross family income is the sum of all money, earned and unearned, already received or reasonably anticipated to be received by all family members in the child's home during the service eligibility period.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ **Note** - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

Fill in the chart based on the most populous area of the state.

Family Size	**(a)** **100% of State Median Income (SMI) ($/month)**	**(b)** **85% of State Median Income (SMI) ($/month)** [Multiply (a) by 0.85]	**(c)** **(IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI**	**(d)** **(IF APPLICABLE) % of SMI** [Divide (c) by (a), multiply by 100] **Income Level if lower than 85% Current SMI**	**(e)** **(IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI**	**(f)** **(IF APPLICABLE) % of SMI** [Divide (e) by (a), multiply by 100] **Income Level if lower than 85% Current SMI**
1	39,756.60	33,793.11				
2	51,989.40	44,190.99				
3	64,222.20	54,588.87				
4	76,455.00	64,986.75				
5	88,687.80	75,384.63				

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

c) SMI Source and year Low Income Home Energy Assistance Program (LIHEAP), FFY 16 Estimates for Maine

d) These eligibility limits in column (c) became or will become effective on: 07/01/2015

e) Provide the link to the income eligibility limits
http://www.maine.gov/dhhs/ocfs/ec/occhs/step.htm

3.1.5 Graduated Phase-Out of Assistance

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

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

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

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

Program income limits are current set using the maximum cap of 85% of the State median income for all families. This will also be incorporated into CCSP rule.

☐ Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not

cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.6 Fluctuation in Earnings

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

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

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

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

List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 5.13.9, 5.13.11 and 5.13.12.

5.13.9 The calculation for self-employment income must be the average income over a twelve -month period when it represents the family's major source of support.

a. This applies even when it is received in a shorter period of time

b. If the twelve-month average is not an accurate reflection of circumstances or a business has been in operation only a part of a year, income will be averaged for the months in operation or the Department or contracted agency may calculate the self-employment income based on anticipated earnings

c. Seasonal self-employment income which supplements other income shall be averaged over the season

5.13.11 If income fluctuates to the extent that a four week period does not provide accurate information to calculate income for the future eligibility period, the Department can use information covering a longer period of time.

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

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially

implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

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

☑ Applicant identity.

Describe:

Proof of identity and residency is required at time of application, and shall be established by

showing a valid photo ID and proof of residency, selected from the following list. If applicants do not have proof of identity, they shall be given ten calendar days to provide it.
Acceptable forms of proof of identity include;
a. An original, valid, current Maine driver's license, permit, Maine State ID, or ID card with a photograph
b. An original, valid, current, unexpired Certificate of U. S. Citizenship (INS Form N-560) with a photograph
c. An original, valid, current, unexpired Certificate of Naturalization (INS Form 550 or INS Form 570) with a photograph
d. An original, valid, current, unexpired U. S. Military ID Card
e. U. S. Military Retiree Card or Uniform Service Identification Privilege Card (DD 1173) with a current photograph
f. An original, valid, current, unexpired or legally extended United States passport with a current photograph.

☑ Applicant's relationship to the child.
Describe:
Self-certification of the applicant's relationship to the child on the program application is accepted at initial application and recertification. In instances where a child is in a kinship/relative caretaker situation a copy of the Child Protective form signed by the caretaker and placement worker along with a signed copy of the Child Placement Agreement or Family Plan is required to verify official kinship/relative caretaker status. As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency may consider changes to the verification requirements.
☑ Child's information for determining eligibility (e.g., identity, age, etc.).
Describe:
Identity and ages are reported on the program application and are verified by birth certificate and/or social security card at initial application.
☑ Work.
Describe:
Income and eligibility will be verified at initial application and recertification through an income and eligibility verification system (IEVS). One of the following is required to document work schedule; 4 weeks of current, consecutive pay stubs showing hours worked, Employment information sheet completed and signed by supervisor/Human Resources

followed by submitting 4 weeks consecutive pay stubs as soon as they are available, for self-employment-current federal income taxes (Form 1040 and all schedules).

☑ Job Training or Educational Program.

Describe:

Enrollment in an educational or job training program can be verified through a class schedule or letter from the instructor at initial application and recertification.

☑ Family Income.

Describe:

Acceptable verification of earned income includes one or more of the following:

a. Four weeks of current, consecutive and complete pay stubs

b. Four weeks of current, consecutive and complete pay envelopes

c. W-2 Form (if representative of current and future earnings)

d. State and/or Federal Income Tax Return

e. Self-employment bookkeeping records

f. Sales and expenditure records

g. Statement of employment and expected gross earnings, signed and dated by the employer on company letterhead to be followed up by paystubs once they are available

h. Employer's wage record

i. Employment Security Office records

j. Verbal verification from caseworker for care and custody Department/Tribal referrals

k. A signed release of information from the applicant which authorizes the Department to pursue verification or further clarification.

Acceptable verification of unearned income includes, but is not limited to, the following:

a. Benefit check (viewed and photocopied by the Department)

b. All types of Award Letters

c. Signed income tax records (interest income, dividends, royalties, estates, trusts, deferred compensation plans, capital gains, etc.)

d. Support and alimony payments evidenced by court order, divorce or separation papers, or check copies

e. Social Security Query Card Response

f. Social Security District Office verification

g. Bank statement

h. Maine Employment Security Commission verification

i. Worker's Compensation verification

j. Insurance company verification

k. Verbal verification from Caseworker for Care and Custody Department/Tribal referrals

☑ Household composition.

Describe:

Self-certification of the applicant's household composition is accepted on the program application at initial application and recertification.

☑ Applicant Residence.

Describe:

Acceptable proofs of residence must show, at initial application, the parent's current physical address. Post Office Box addresses are not accepted as proof of Maine residency.

a. Current Maine driver's license showing a Maine residence address

b.Maine utility bills with service at a Maine residence address

c. Maine property tax bill or receipt indicating a Maine residence address

d. Maine mortgage documents or homeowner insurance documents for a Maine residence or proof of Maine home ownership with a Maine residence address

e. Maine W-2 Form not more than eighteen months old with the applicant's name and Maine residence address

f. Current Maine individual income tax return indicating Maine Resident status

g. Maine Voter's registration card with a Maine residence address

h. Maine school enrollment form if applicant is under age 18 with the applicant's Maine residence address

i. Residential rental and/or lease agreement with a Maine address

j. Current Maine hunting/fishing license with a Maine residence address

k. Proof of undergraduate student in-state tuition payment

l. Two signed affidavits by two different individuals who can prove the applicant's Maine residency.

☑ Other.

Describe:

Documentation of Maine residency includes a Maine home address where the applicant lives and one or more of the following items:

a. current Maine individual income tax return indicating Maine Resident status,

b. valid Maine driver's license,

c. Maine State ID,

d. current Maine motor vehicle registration,

e. current Maine hunting/fishing license,

f. proof of undergraduate Student instate tuition payment, and

g. other reasonable verification.

Exception: Individuals who are homeless must provide a self-declaration of residence and have two affidavits signed by two different individuals who are Maine residents.

As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency will propose to make changes to the requirement that homeless individuals must produce two, signed affidavits.

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

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

☑ Time limit for making eligibility determinations.

Describe length of time :

The Lead Agency shall determine eligibility within 30 days of receiving an application.

☑ Track and monitor the eligibility determination process

☑ Other.

Describe:

The Lead Agency is required by Maine Statute to pay child care assistance retroactively to the date of application.

☐ None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2)of the Social Security Act.
In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.
NOTE: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

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

State/Territory TANF Agency The State of Maine Department of Health and Human Services Office for Family Independence is the agency responsible for the administration of the TANF block grant.

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

"appropriate child care":

Appropriate child care is affordable child care furnished by a child care provider who has passed background checks as required by State law and regulations.

"reasonable distance":

Reasonable distance means that the ASPIRE participant is required to commute no more than 15 additional miles between home and work activity in order to transport the child to the child care provider.

"unsuitability of informal child care":

Unsuitable child care is that provided by an individual who cannot pass a required background check or is unaffordable or would require the ASPIRE participant to travel an unreasonable distance.

"affordable child care arrangements":

Affordable child care arrangements are those for which the participant incurs no cost or is reimbursed by another program such as ASPIRE or through a deduction for child care from income by the TANF program or by any combination of these methods.

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

☑ In writing

☑ Verbally

☐ Other.

Describe:

☑ List the citation to this TANF policy.

List:

Chapter 331 Maine Public Assistance Manual, Chapter II Eligibility Requirements (non-financial) TANF.

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

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

3.2 Increasing Access for Vulnerable Children and Families

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

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

a. Provide definition of "Children with special needs": Current CCSP rule defines a child with special needs as a child under the age of 12 with a specific diagnosis/disability which without intervention may impede or impair the attainment of developmental milestones. This includes: 1.A child who experiences significant developmental delays or who has a diagnosed physical or mental condition which has a high probability of resulting in a significant developmental delay. Significant delay is a 25% delay in one or more areas of development or a six (6) month delay in two (2) or more areas. Areas of development include: cognitive, speech/language, physical/motor, vision, hearing, psycho-social, and self-help skills. Developmental delay is determined and documented by early intervention programs, special education programs, or other multi-disciplinary teams. Documentation must be provided with the application for Child Care Subsidy. 2.A child considered being at-risk for health or developmental problems as a result of established biological risk factors, and/or as a result of identified environmental risk factors including homelessness, and who is referred by a third party such as public health agencies, physicians, schools, government agencies, community social service agencies, homeless shelter, early intervention specialists, and/or Federally Recognized Tribes; and 3.A child between thirteen (13) years of age and eighteen (18) years of age, inclusive, who is physically or mentally incapable of caring for him or herself or is under court supervision, can also be provided a Subsidy. As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency will propose to make changes to definition: Child with special needs means a child up to the age of 13 who meets one or more of the following which has been determined and documented by a qualified professional: a. A child with a disability, as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); b. A child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.); c. A child who is less than thirteen years of age and who is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); d. A child who meets the definition of disability under the Americans with Disabilities Act (ADA) (P.L. 110-325); e. A child who requires intervention in order to meet developmental milestones; f. A child who is considered at-risk for health and/or developmental problems as a result of established biological risk factors, and/or as a result of identified environmental risk factors including, but not limited to, homelessness, abuse and/or neglect, lead poisoning, and prenatal drug or alcohol exposure; g. A child between thirteen years of age and eighteen years of age, inclusive, who is physically or mentally incapable of caring for him or herself or is under court supervision, can be provided Child Care Subsidy.

and describe how services are prioritized:

Children with special needs receive priority status on the Child Care Subsidy Program waiting list, if applicable.

b. Provide definition of "Families with very low incomes": means gross family income, adjusted to family size, does not exceed 100% of the Federal Poverty Guidelines

and describe how services are prioritized:

Children from very low income families, children with special needs and children who are homeless will be given priority on the waitlist (as applicable) over other children otherwise eligible for Child Care Subsidy services.

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)

Children with special needs, who are homeless or who are from a family with very low income must be given priority over all other children on the CCSP waiting list. Among these three priority groups, children are selected for services on a first-come, first-served basis by county based on the date of application.

3.2.2 Improving Access for Homeless Children and Families.

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

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

implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

Children with special needs, with very low income or who are homeless must be given priority over all other children. Among these priority groups, children are selected for services on a first-come, first-served basis by county based on the date of application. Documentation provided with application will verify priority status. The current Child Care Subsidy rules allow a ninety day grace period to be granted while parents are taking the necessary actions to comply with the immunization requirement. Additionally, homeless families may verify Maine residency status with a single affidavit signed by a Maine resident.

b. Procedures to conduct outreach to homeless families to improve access to child care services

The Lead Agency is partnering with the Maine State Housing Authority to ensure that staff which administer the Housing and Urban Development (HUD) Family Self-Sufficiency Program, the Home to Stay Program and the Homeless Navigators statewide are aware of the Child Care Subsidy Program and can refer eligible families. The State Administrator presented to and shared written materials with 100 Homeless Navigators to ensure that eligible families who are experiencing homelessness are being referred to the Child Care Subsidy Program. Additionally, The State Administrator attends the FSS Program Coordinating Council Provider Meetings to network with other service providers with a common goal to assist families to become self-sufficient.

c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

The current Child Care Subsidy rules allow a ninety day grace period to be granted while parents are taking the necessary actions to comply with the immunization requirement .

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.3 Protection for Working Parents

3.3.1 Twelve Month Eligibility

The CCDBG Act of 2014 establishes a 12-month eligibility period for CCDF families. States are

required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) &(ii))

Note that this change means a State may not terminate CCDF assistance during the 12 month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period for CCDF families.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination
List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other) Substantially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The Department currently writes award will re-determine eligibility of all parents receiving subsidy with verified documentation no sooner than every 12 months. Periodic spot checks for accuracy and eligibility may be done. When possible, re-determinations for Subsidy will be aligned with food supplement or MaineCare re-determination when a subsidy recipient receives one of these programs. A temporary change means a change that is expected to last 12 weeks or less. Families will remain on the program and are not subject to termination when a change is considered to be temporary. This includes job search, maternity/paternity leave, and summer vacation for teachers and students. Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 8.02: Re-determining Eligibility.

Unmet requirement - Identify the requirement(s) to be implemented A minimum 12-month eligibility and redetermination period for CCDF families.

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

Maine will revise the Child Care Subsidy Rules, conduct a public hearing and implement the changes which will incorporate all components12 month eligibility. Maine will clarify the intent of "periodic spot checks" in response to public comments, remove the language that limits the number leaves and the length of maternity/paternity/medical leaves and allow for continued assistance at the same rate during leaves or job search.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option - but does not require them - to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

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

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

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 4.08: Parents on Maternity/Paternity Leave, Short-Term Medical Leave or Job-Search for Active Recipients and Section 11: Termination of services. A parent is eligible for one of the following three breaks in eligibility within a six month period. Only one covered break in eligibility as defined below shall be granted within a six month period:

The Department will pay for up to twelve weeks of child care for current recipients who have lost work or who have completed school and are looking for work. This coverage starts at the time of the first day of unemployment. Parents must contact the Department and complete a Job Search Request Form and request job search time. The parent shall

be granted up to twenty hours a week of subsidized child care. This leave is separate time and is not counted against excused absences.

As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency will propose to make changes to allow the parent's award to continue at the same rate throughout any approved leave period. In the current rule, CCSP pays up to 20 hours a week during the job search period. When requesting job search, parents can complete the Job Search Request Form, make the request verbally and/or via fax or email.

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

3.3.3 Prevent Disruption of Work

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

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

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

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 8.02.1, 8.02.2 and 8.03. The Department will send the parent written notification at least thirty calendar days before the re-determination is due. The Department will re-determine eligibility of all parents receiving subsidy with verified documentation no sooner than every twelve months. Periodic spot checks for accuracy and eligibility may be done. When possible, re-determinations for subsidy will be aligned with food supplement or MaineCare re-determination when a subsidy recipient receives one of these programs. The child care provider will also be notified.

All Parents receiving Child Care Subsidy being re-determined for eligibility must provide the following information to the Department at least twelve calendar days prior to the end date on their current award letter:

a. Information necessary to re-determine eligibility, calculate and assess fees, and issue subsidy payments
b. Verification of income
c. If the parent is a student who is enrolled and attending an educational or job training program, provide verification of enrollment status in the current or subsequent semester class hours and/or training hours must be verified through a class schedule or letter from the instructor.

Maine avoids unduly disrupting employment by: aligning re-determination dates with other benefits; requiring verification no sooner than every 12 months; not requiring face-to-face interviews; and allowing participants to be re-determined for multiple programs at the same time. Maine plans to remove the requirement for participants to supply their grades at the end of each semester. This allows the program to rely on university and college minimum grade point average (GPA) policies and reduce paperwork burden for participants. By giving participants a 30 day notice of re-determination they are given adequate time to produce required documentation and verification. Finally, an agreed upon process with the Division of Child Support Enforcement allows eligibility workers to obtain child support information for re-determinations electronically with a signed release, taking the burden off participants.

As part of the new child care system parents will be allowed to submit documents in whatever form is easiest for them, including electronically.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.4 Family Contribution to Payment

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

ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size.

☐ Note - If the sliding fee scale is not statewide, check here

and describe how many jurisdictions set their own sliding fee scale

Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	2,599.00	4.00	2%	33,793.11	281.60	10%
2	2,599.00	4.00	2%	44,190.99	368.33	10%
3	2,599.00	4.00	2%	54,588.87	454.90	10%
4	2,599.00	4.00	2%	64,986.75	541.55	10%
5	2,599.00	4.00	2%	75,384.63	628.20	10%

a) What is the effective date of the sliding fee scale(s)? July 1, 2015

b) Provide the link to the sliding fee scale
http://www.maine.gov/sos/cec/rules/10/chaps10.htm#148 > Chapter 6, Page 45

3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use.

☐ Fee as dollar amount and

☐ Fee is per child with the same fee for each child

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

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

  Describe:

  - [ ] Other.

  Describe:

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

- [ ] Yes, and describe those additional factors using the checkboxes below.
  - [ ] Number of hours the child is in care
  - [ ] Lower copayments for higher quality of care as defined by the State/Territory
  - [ ] Other.

  Describe other factors.

- [x] No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size.

Will the Lead Agency waive family contributions/co-payments?

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

The poverty level used by the Lead Agency for a family size of 3 is $

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

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

☑ Limits the maximum co-payment per family.

Describe:

The total amount of parent fees assessed to a family cannot exceed ten percent (10%) of the family's gross income for all of their children enrolled in the subsidy program.

☑ Limits combined amount of copayment for all children to a percentage of family income.

List the percentage of the copayment limit.

Describe:

The total amount of parent fees assessed to a family cannot exceed ten percent (10%) of the family's gross income for all of their children enrolled in the subsidy program.

☐ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5.

Describe:

☑ Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying.

Describe:

Providers are cannot collect fees from parents in excess of the assessed parent fees as stipulated in the parent's award letter. An exception is made for one-time deposit/registration/application fees and special activity fees. This requirement is outlined in

the Child Care Subsidy rules and the provider agreement.

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

Describe:

☐ Other.

Describe:

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

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

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

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

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the

CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

Once a family is determined to be financially and programmatically eligible, staff inform parents they are eligible for a subsidy and parents are able to select their own provider that meets program standards. Staff also assist with direct program referrals at the request of the parent. Parents also have access to various resources in order to aid them in selecting a provider including the consumer education website, childcarechoices.me. Maine is also exploring Help Me Grow as a model to support early childhood program linkages. The full analysis of Help Me Grow will include the ways in which this system can assist families in getting linked up with appropriate child care settings.

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

☑ Certificate form provides information about the choice of providers, including high quality providers

☑ Certificate is not linked to a specific provider so parents can choose provider of choice

- [x] Consumer education materials on choosing child care
- [ ] Referral to child care resource and referral agencies
- [x] Co-located resource and referral in eligibility offices
- [ ] Verbal communication at the time of application
- [ ] Community outreach, workshops or other in-person activities
- [ ] Other.

Describe

4.1.3 Child Care Services Available through Grants or Contracts

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

- [ ] Yes. If yes, **describe**

  the type(s) of child care services available through grants or contracts

  the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)

  the process for accessing grants or contracts

  the range of providers available through grants or contracts

  how rates for contracted slots are set for grants and contracts

  how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

  if contracts are offered statewide and/or locally:

- [x] No. If no, skip to 4.1.4.

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

- ☐ Increase the supply of specific types of care with grants or contracts for:
  - ☐ Programs to serve children with disabilities
  - ☐ Programs to serve infants and toddlers
  - ☐ Programs to serve school-age children
  - ☐ Programs to serve children needing non-traditional hour care
  - ☐ Programs to serve homeless children
  - ☐ Programs to serve children in underserved areas
  - ☐ Programs that serve children with diverse linguistic or cultural backgrounds
  - ☐ Programs that serve specific geographic areas
    - ☐ Urban
    - ☐ Rural
  - ☐ Other.

  Describe:

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

☐ Programs that serve specific geographic areas

☐ Urban

☐ Rural

☐ Other.

Describe:

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

Describe the policies and procedures for unlimited access

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 7.08, Assuring Parent Rights: Except for court-ordered restricted parental contact or custody, parents must have unlimited access to their children and to all child care providers during normal hours of operation or whenever the children are in the care of the child care provider. A parent may immediately terminate the subsidy agreement for failure of the child care provider to allow unlimited access to their children. This requirement is outlined in the Child Care Subsidy rules and the provider agreement.

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

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

☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

Describe:

☑ Restricted based on provider meeting a minimum age requirement

Describe:

In-home child care provider means a child care provider who is 18 years of age or older.

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)

Describe:

☐ Restricted to care by relatives

Describe:

☐ Restricted to care for children with special needs or medical condition

Describe:

☑ Restricted to in-home providers that meet some basic health and safety requirements

Describe:

In-home providers receiving subsidy payment must meet the same background check requirements and other health and safety requirements as other unlicensed providers.

☑ Other

Describe:

In-home care is provided in a child's home by a child care provider hired by the parent and cannot provide care for more than two children receiving child care subsidy. The provider may be a relative, but not be a member of the child's household.

☐ No.

4.2 Assessing Market Rates and Child Care Costs

The new law revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in

advance of the Plan submittal in order to avoid delays with Plan approval. (see http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq).

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

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the results on the Internet.

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

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

- [x] MRS
- [ ] Alternative Methodology.

Describe:

- [ ] Both.

Describe:

- [ ] Other.

Describe:

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology.

Describe:

The Child Care Advisory Council provided ongoing input on the creation of the Market Rate Survey design and also aided in getting input from child care providers during development. There were approximately 100 emails and phone calls from providers across the state who offered input into the survey design. All provider recommendations were considered and reviewed and many were incorporated into the design of the survey. The CCAC was kept apprised of progress on the MRS regarding response rate and continuous outreach techniques.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

Describe:

The Market Rate Survey (MRS) is conducted with licensed and CCDF unlicensed child care providers in Maine. To maximize representation, all child care providers are invited to conduct the survey via multiple modes, including the internet, postal survey, or by phone. The source of the contact information comes from Maine's licensing and Child Care Subsidy database and includes mailing address, emails, and telephone numbers. Data collection is based on a multi-mode strategy guided by the Tailored Design Method (Dillman, 2014) Contact with the providers is initiated with a prenotification letter that describes the purpose

and importance of the survey. Following this initial contact, the data collection is conducted in multiple phases to maximize response.

In phase 1, providers are contacted through email and invited to conduct the survey on the internet. In Phase 2, providers are sent a mail survey, followed by a postcard reminder and then a replacement survey. In phase 3, the providers are contacted by telephone to conduct the survey by phone. The entire data collection occurs over several months to ensure all providers have the opportunity to respond. The estimation is conducted at the county level to reflect geographic variability in child care rates. Child care rate estimates are weighted by desired capacity so that the estimates reflect child care availability. Estimates are produced for alternative payment periods (daily, weekly, full-time, part-time) for four age ranges (infant, toddler, preschool and school-age).

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

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

The Market Rate Survey (MRS) was distributed to all licensed providers statewide and all CCDF license-exempt providers. Survey results are included by county.

b) Type of provider:

The Market Rate Survey (MRS) was distributed to all licensed providers statewide and all CCDF license-exempt. Survey results are broken down by each of the three types of child care providers eligible to care for children who receive CCDF:

- Licensed child care centers,
- Licensed family child care
- Unlicensed child care

c) Age of child:

The Market Rate Survey (MRS) was distributed to all licensed providers statewide and all CCDF license-exempt providers. Survey results are broken down by the following age groups:

- Infant (6 weeks- 12 months)
- Toddler (13-36 months)
- Preschool (37 months-kindergarten enrolled)
- School Age (enrolled in school)

Providers were asked to outline their program capacity by age group (desired capacity, subsidy capacity and current vacancies) as well as their full time and part time rates by age group.

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

None

4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)
12/11/2015

b) Date report containing results were made widely available, no less than 30 days after the completion of the report 12/30/2015

c) How the report containing results was made widely available and provide the link where the report is posted if available

The final MRS Report is available at http://www.maine.gov/dhhs/ocfs/ec/occhs/child-care.html. Additionally, an email notification was sent to all CCDF and licensed providers sharing the final report.

4.3 Setting Payment Rates

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

☐ Note - If the payment rates are not set by the State/Territory, check here

Describe how many jurisdictions set their own payment rates

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

Rate $ 244 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

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

Rate $ 180 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

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

Rate $ 227 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

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

Rate $ 160 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 5oth

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

Rate $ 210 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

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

Rate $ 160 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

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

Rate $ 110 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate $ 100 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 50th

i) Describe the calculation/definition of full-time care:

Current Child Care Subsidy policy defines a full-time award authorization as being equal to

or greater than a parent(s) working or attending an educational or job training program 30 hours a week. This amount accounts for travel and breaks in addition to the core schedule. Additionally, for parents attending an educational or job training program the calculation includes the schedule of classes and at least two hours of study time for each credit hour per course. As part of the MRS, providers were asked to define their full-time and part-time rates and indicate their program's definition of full-time. As part of the new child care system Maine will explore best practice for the number of hours that constitute part time and full time rates and ensure a consistent definition is implemented across the entire system.

j) Provide the effective date of the payment rates : June 1, 2016

k) Provide the link to the payment rates :
http://www.maine.gov/dhhs/ocfs/ec/occhs/step.htm

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☑ Tiered rate/rate add-on for non-traditional hours.

Describe:
A provider's weekly base rate is multiplied by the percentage of the total weekly hours that are off hours to give a dollar amount. The dollar amount is then multiplied by 35% to give the amount of providers off hour rate increase. Off hours are considered to be 6pm to 6am and all weekend hours.

☐ Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

☑ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

Maine provides a percentage increase in payments on behalf of families utilizing the Child Care Subsidy Program for providers who are at various steps on the Quality Rating and Improvement System. The higher quality the program is, the more incentive or quality bump funds they receive. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. This incentivizes programs to move up the QRIS and also provides increased funding to allow the program to sustain their high-quality program.

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

Describe:

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

Describe:

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

Describe:

The Department utilizes the results of the MRS to determine rates. A review of the most recent MRS is used as part of the analysis conducted in order to determine market rates. In

establishing reimbursement rates, the Department must ensure the rates are affordable based on available funds and reflective of workforce and family needs.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

Describe:

Maine provides a percentage increase in payments on behalf of families utilizing the Child Care Subsidy Program for providers who are at various steps on the Quality Rating and Improvement System. The higher quality the program is, the more incentive or quality bump funds they receive. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. This incentivizes programs to move up the QRIS and also provides increased funding to allow the program to sustain their high-quality program. Families who are enrolled in programs at step 4 are eligible to receive a double child care tax credit on their state income tax. This encourages families to seek out high-quality programs and provides a financial incentive for utilizing them.

As part of the new child care system implementation process, Maine will conduct a thorough analysis of the rate structure and will explore quality incentive for all child care providers participating in QRIS in all parts of the new child care system. Maine is looking at ways to make the child care system align better with private market child care practices, which includes conducting appropriate fiscal analysis.

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

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

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

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

Describe:

☑ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.

☐ Rates based on data on the cost to the provider of providing care meeting certain standards

Describe:

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

Describe:

☐ Data on the proportion of children receiving subsidy being served by high-quality providers.

Describe:

☑ Data on where children are being served showing access to the full range of providers. .

Describe:

As of November 2015, 29% of children receiving subsidized child care were enrolled in programs with QRIS rating 3 & 4, the highest levels of quality in the QRIS. 65% of children receiving CCDF are utilizing child care centers, 20% are using family child care and 14% are using unregulated providers indicating equal access and parent choice. A review of county-level CCDF data shows families accessing CCDF from each of Maine's

16 counties.

☐ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.

Describe:

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

Describe:

☐ Other.

Describe:

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

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

☑ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

Equal access is ensured by consideration of the following factors: Market rates are legislatively set at the 50th percentile of surveyed rates from the most recent (in this case 2015) Market Rate survey for providers; 29% of children receiving CCSP are in step 3 & 4 programs; and payment rates are tied to step levels so that reimbursement increases as the levels of quality increase.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5 Payment Practices and Timeliness of Payments

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

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

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

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. Check all that apply and describe.

The Lead Agency

☑ Pays prospectively prior to the delivery of services.

Describe:

As a result of the new child care system, Maine will align child care subsidy payments with the private child care market. Maine is currently conducting appropriate fiscal analysis to inform implementation.

☑ Pays within no more than 21 days of billing for services.

Describe:

When the child care provider's bill is correctly completed and submitted to the Department within the time frame stipulated in the provider agreement, the Department will pay the child care provider within ten working days of receiving the child care provider's request for payment. Maine will implement an electronic provider billing system. This system allows providers to enter their billing information into the online system. The bills are then reviewed for approval by staff and sent directly to be processed for payment. This advanced system will eliminate many opportunities for administrative error and an easier tool for providers to submit bills.

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

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

Specify percent and describe

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 9.05. The amount of hours allowed for excused absences is based on the amount of time in the award. Children with full-time awards are allowed 200 hours of excused absences within an award year, children with part-time awards are allowed 150 hours of excused absences within an award year, children with half-time awards are allowed 100 hours of excused absences within an award year, and children with quarter-time awards are allowed 50 hours of excused absences within an award year. For children who have split awards between two or three categories, the average between the categories will be allowed for excused absences within an award year. Temporary leaves including short-term medical, maternity/paternity leave and job search are not counted against excused absences. The provider must obtain prior written

approval from the State Child Care Administrator for any additional excused absence time.

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.

Specify the number of absence days allowed and paid for and describe

Policy Citation: 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 9.05. The amount of hours allowed for excused absences is based on the amount of time in the award. Children with full-time awards are allowed 200 hours of excused absences within an award year, children with part-time awards are allowed 150 hours of excused absences within an award year, children with half-time awards are allowed 100 hours of excused absences within an award year, and children with quarter-time awards are allowed 50 hours of excused absences within an award year. For children who have split awards between two or three categories, the average between the categories will be allowed for excused absences within an award year. Temporary leaves including short-term medical, maternity/paternity leave and job search are not counted against excused absences. The provider must obtain prior written approval from the State Child Care Administrator for any additional excused absence time.

☑ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

As a result of the new child care system, Maine aims to align child care subsidy payments with the private child care market. Maine is currently conducting appropriate fiscal analysis to inform implementation.

☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

Describe:

☑ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

Program and payment eligibility will be reviewed by the Department based on changes reported by the parent. The parent and the child care provider will receive a new award letter if the subsidy payment and/or the parent fee changes. When the parent reports a

change in circumstances affecting a change in the parent fee, the change will become effective: following re-determination of eligibility and after a new award letter has been sent to both parent and child care provider via timely notice. The parent fee shall not be increased between redeterminations if the family's income increases except to correct an error in prior calculation. Timely notice means written notification from the Department that is mailed to the parent and the child care provider twelve calendar days before change is effective. This allows ten calendar days for notice that subsidy services will terminate or change and two days for mailing. For the purposes of this program, notice mailed to the last known address, and not returned, is assumed to have been received.

☑ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

In the event of an overpayment, the individuals who are responsible for the repayment of the overpayment shall be provided with written notice of overpayment upon establishment. The written notice of overpayment shall be sent to the Department's last known address of the individuals, by U.S. Postal Service first class mail and be considered as received upon being sent. Written notification includes hearing and appeal rights. If the child care provider is solely responsible for repaying the overpayment, the parent shall be notified in advance of the proposed change in benefits and that the child care provider cannot hold the parent responsible for paying the difference. Written request for an Administrative Hearing on establishment of the overpayment delivered to the Department within thirty calendar days of the notice shall stay recovery actions until issuance of a decision which upholds the Department's establishment of the overpayment.

☑ Other.

Describe:

In order to maintain continuity of child care services, and if it is the established practice of a licensed or certified child care provider to charge the general public for such periods of time, the Department will pay the provider for holidays, up to four training days, and up to one week of provider vacation time in a twelve month period, if the provider's written policy requires payment for scheduled closings.

☑ For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory.

As a result of the new child care system, Maine will align payment practices with the

private child care market. Maine is currently conducting appropriate fiscal analysis to inform implementation. Maine does not intend to pay standard customary fees or pay based on enrollment as part of the Child Care Subsidy Program in order to ensure the CCDF funds can be stretched to serve the most number of children possible.

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

☑ Policy on length of time for making payments.

Describe length of time:

When the child care provider's bill is correctly completed and submitted to the Department within the time frame stipulated in the provider agreement; the Department will pay the child care provider within ten working days of receiving the child care provider's request for payment.

☐ Track and monitor the payment process

Describe:

☑ Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

Maine has implemented a web-based automated billing system to reduce administrative burden on staff and providers. Direct deposit of payments is also an option for providers, but not mandatory.

☐ Other.

Describe:

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

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

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

☑ Yes.

Describe data sources

Maine uses a multitude of reports to assess child care needs and the overall structure of the child care system. The Child Care Advisory Council in addition to the Lead Agency reviews program data regularly to adapt to the ever-changing needs of the consumers. The data that is reviewed includes Child Care Licensing capacity reports, consumer education online traffic reports, Quality Rating and Improvement System (QRIS) data, Child Care Subsidy and TANF/ASPIRE child care program reports, professional development utilization, Census and population data and child welfare data.

☐ No.

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

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

a) Infants and toddlers (check all that apply)

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

Describe

b) Children with disabilities (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☑ Technical assistance support

- [ ] Recruitment of providers
- [ ] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

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

- [ ] Grants and contracts (as discussed in 4.1.3)
- [ ] Family child care networks
- [ ] Start-up funding
- [x] Technical assistance support
- [ ] Recruitment of providers
- [x] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

d) Homeless children (check all that apply)

- [ ] Grants and contracts (as discussed in 4.1.3)
- [ ] Family child care networks
- [ ] Start-up funding
- [x] Technical assistance support
- [ ] Recruitment of providers
- [ ] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and

unemployment and that do not have such high-quality programs. (658E(c)(2)(Q))

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

☐ Fully implemented and meeting all Federal requirements outlined above.

Describe

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

Overall Target Completion Date (no later than September 30, 2016) 09/3/0/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Maine provides a percentage increase in payments on behalf of families receiving subsidy for providers who are at various steps on the Quality Rating and Improvement System. The higher quality the program is the more incentive or quality bump funds they receive. Providers at a step 2 receive 2% quality bump in payment. Providers at a step 3 receive a 5% quality bump and providers at the highest level, 4, receive 10% quality bump. This incentivizes programs to move up the QRIS and also provides increased funding to allow the program to sustain their high-quality program. Families who are enrolled in programs at step 4 are eligible to receive a double child care tax credit on their state income tax. This encourages families to seek out high-quality programs and provides a financial incentive for utilizing them. Maine also supports the Child Care Investment Tax Credit which assists providers in making investments in their centers or homes.

Additionally, Maine Roads to Quality, Maine's Professional Development Network,

provides support through technical assistance and mini grants to aid child care programs in becoming and maintaining national accreditation. Technical assistance professionals along with child care providers will have access to trainings that cover adverse childhood experiences (ACEs) and resilience building through a partnership with the Maine Resilience Building Network (MRBN).
In the Child Care Subsidy Program, children who are homeless, who come from low income families and who have special needs receive a priority on the waiting list as a way to ensure children who are at-risk have access to high-quality programs.
Finally, the Lead Agency holds statewide contracts for homeless outreach services. As part of the contract, outreach workers are trained on the eligibility criteria of the Child Care Subsidy services available to their consumers and are provided with child care resources. The child care referrals that come from the outreach workers will be tracked in the Homeless Information Management System (HMIS) along with the number of families who ultimately are enrolled in Child Care Subsidy as a result of the referrals.

Unmet requirement - Identify the requirement(s) to be implemented increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Assess which parts of Maine are considered to have high concentrations of poverty

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31//2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Make funds available to increase access to quality for children in those areas.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 9//30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

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

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

5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a

detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Child care center means a house or other place in which a person maintains or otherwise carries out a regular program, for consideration, for any part of a day providing care and protection for thirteen or more children under thirteen years of age; or any location or locations operated as a single child care program or by a single person or persons when there are more than twelve children being cared for. This includes school-age before and after school care.

Small child care facility means a house or other place, not the residence of the operator, in which a person, or combination of persons, maintains or otherwise carries out a regular program, for consideration, for any part of a day providing care and protection for 3 - 12 children under the age of thirteen.

Family child care provider means the person who has received a certificate from the department to operate a family child care program. The provider is legally responsible for the operation of the family child care program. The provider must reside at the residence being operated as a family child care program. A family child care program certificate permits a qualified person to care for three to twelve children between the ages of six weeks old and thirteen years old who are not related to the provider. This includes school-age before and after school care.

Nursery school means a house or other place in which a person or combination of persons maintains or otherwise carries out for consideration during the day a regular program which provides care for three or more children, who are between the ages of thirty-three months

and under eight years of age, provided that: 1. No session conducted for the children is longer than three and one half hours in length; 2. No more than two sessions are conducted per day; 3. Each child in attendance at the nursery school attends only one session per day; and 4. No hot meal is served to the children.

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

☑ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

Current statutes exempt any individual caring for fewer than three unrelated children from certification. The limited number of children in this license-exempt setting results in a high level of adult supervision resulting in low levels of risk to children. A summer camp established solely for recreational and educational purposes are licensed by the Maine Center for Disease Control which assures the health and safety of children in those settings. Additionally, recreational programs are eligible to receive CCDF but are not required to be licensed or certified. These programs are staffed by trained professionals and instruction occurs in controlled settings under close supervision, and for limited periods of time, which results in low levels of risk to children.

☐ No.

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

☑ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including

planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

a) Licensed Center-Based Care

1. Infant
   - State/Territory age definition:

6 weeks-1 year
   - Ratio:

1:4

- Group Size:

8

2. Toddler
   - State/Territory age definition:

1 Year-2 ½ Years

- Ratio:

1:4 or 1:5

- Group Size:

12 or 10

3. Preschool:
   - State/Territory age definition:

2 ½-3 ½ & 3 ½ -Not yet school-age 5

- Ratio:

1:7 & 1:8 or 1:10

- Group Size:

21 & 24 or 20

4. School-Age
   - State/Territory age definition:

5 Years-13 Years

- Ratio:

1:13

- Group Size:

N/a

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

N/a

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.

When there is a combination of ages within a group, the group size and the number of required staff shall be determined based on the age of the youngest child.

b) Licensed Group Child Care Homes:

1. Infant
   - State/Territory age definition:

   - Ratio:

   - Group Size:

2. Toddler
   - State/Territory age definition:

   - Ratio:

   - Group Size:

3. Preschool:
   - State/Territory age definition:

- Ratio:

- Group Size:

4. School-Age
   - State/Territory age definition:

   - Ratio:

   - Group Size:

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

6. If any of the responses above are different for exempt group child care homes, describe

☑ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

One provider, working alone, may care for:

4 infants and toddlers, or
3 infants and toddlers plus 3 preschool children, plus 2 school-age children, or
8 preschool children plus 2 school-age children, or
12 school-age children.

With one additional staff person, a family child care provider may serve:
8 infants and toddlers, or
12 preschool through school age children, or
12 school-age (5 - 12 years) children, or
12 infant through school-age children (6 weeks - 12 yrs) with no more than 6 infants and toddlers.

With two additional staff person, a family child care provider may serve:
12 infants and toddlers, or
12 preschool through school age children, or
12 school-age (5 - 12 years) children, or
12 infant through school-age children (6 weeks - 12 yrs) with no more than 9 infants and toddlers.

Describe the group size:
The maximum size for a family child care is 12 children
Describe the threshold for when licensing is required:
Any person who providers child care in that person's home on a regular basis, for consideration, for three to twelve children under thirteen years of age who are not the children of the provider must have a certificate from the Department of Health and Human Services
Describe the maximum number of children that are allowed in the home at any one time:
12
Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:
Children living with the provider who are five years of age and older are not counted in determining the staff-child ratio. Children under 5 years of are counted in the staff-child ratio
Describe the limits on infants and toddlers or additional school-age children that are

allowed for part of the day:

Providers shall not be penalized if they exceed their certified capacity, only when the following conditions exist:

1-Unpredictable circumstances, not under the provider's control. Examples are bad weather, lateness of the parent, or emergency school closings. Proper supervision must be maintained. Procedures for managing such events must be explained in the written emergency plan.

2-Regularly occurring transition times (shift changes, end of school day), as long as the staff-child ratio is maintained and there is adequate space. This provision is limited to no more than two children over certified capacity, and the time must not exceed one hour total per day.

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

N/a

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

Small Facility : 6 weeks-2 years;

If all children are under two years of age, one staff may care for up to four children.

If all children are under two years of age, two staff may care for up to eight children, or three staff may care for up to twelve children if all are under the age of two years.

2 years -5 years; One staff may care for up to eight children between the ages of two years and five years old plus two children over the age of five years, or two staff may care for up to twelve children over the age of two years old, or three staff may care for up to twelve children if all are over the age of two years.

5 years - 12 years of age; One staff may care for up to twelve children who are over the age of five years.

Licensed Center-Based Care: Nursery Schools ratio is 1:12,

Describe group size:

for Licensed Center-Based Care: Small Facility is 12 and for Nursery Schools is 30,

Describe the threshold for when licensing is required:

3 or more unrelated children

Describe maximum number of children that are allowed in the home at any one time:

12

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

Children living with the provider who are five years of age and older are not counted in determining the staff-child ratio. Children under 5 years of age are counted in the staff-child ratio

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

Providers shall not be penalized if they exceed their certified capacity, only when the following conditions exist: 1-Unpredictable circumstances, not under the providers control. Â Examples are bad weather, lateness of the parent, or emergency school closings. Â Proper supervision must be maintained. Â Procedures for managing such events must be explained in the written emergency plan. Â 2-Regularly occurring transition times (shift changes, end of school day), as long as the staff-child ratio is maintained and there is adequate space. Â This provision is limited to no more than two children over certified capacity, and the time must not exceed one hour total per day.

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed,minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher

    1. The group leader or person having the primary responsibility for a group of children in a facility with thirteen or more children shall be at least eighteen years of age and meet one of the following:
        1. Credential: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
        2. Experience: Six months experience working in a child care facility licensed for 13 or more children.

3. College credits: One year (30 credit hours) of college work including a course in a child related subject

and assistant teacher qualifications:

All staff shall be at least eighteen years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program. All staff shall demonstrate the following: The ability and willingness to comply with all applicable laws and rules; the ability to provide safe and compassionate services; and a history of honest and lawful conduct.

2. Toddler lead teacher

1. The group leader or person having the primary responsibility for a group of children in a facility with thirteen or more children shall be at least eighteen years of age and meet one of the following:
    1. Credential: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
    2. Experience: Six months experience working in a child care facility licensed for 13 or more children.
    3. College credits: One year (30 credit hours) of college work including a course in a child related subject

and assistant teacher qualifications:

All staff shall be at least eighteen years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program, now called High School Equivalency Test (HiSET). All staff shall demonstrate the following: The ability and willingness to comply with all applicable laws and rules; the ability to provide safe and compassionate services; and a history of honest and lawful conduct.

3. Preschool lead teacher

1. The group leader or person having the primary responsibility for a group of children in a facility with thirteen or more children shall be at least eighteen years of age and meet one of the following:
    1. Credential: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
    2. Experience: Six months experience working in a child care facility licensed for 13 or more children.
    3. College credits: One year (30 credit hours) of college work including a course in a child related subject

and assistant teacher qualifications:

All staff shall be at least eighteen years old. All staff shall have a high school diploma or

equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program, now called High School Equivalency Test (HiSET). All staff shall demonstrate the following: The ability and willingness to comply with all applicable laws and rules; the ability to provide safe and compassionate services; and a history of honest and lawful conduct.

4. School-Age lead teacher

The group leader or person having the primary responsibility for a group of children in a facility with thirteen or more children shall be at least eighteen years of age and meet one of the following:

1. Credential. Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
2. Experience. Six months experience working in a child care facility licensed for 13 or more children.
3. College credits. One year (30 credit hours) of college work including a course in a child related subject

and assistant teacher qualifications:

All staff shall be at least eighteen years old. All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED (General Educational Development) preparation program, now called High School Equivalency Test (HiSET). All staff shall demonstrate the following: The ability and willingness to comply with all applicable laws and rules; the ability to provide safe and compassionate services; and a history of honest and lawful conduct.

5. Director qualifications:

Director and/or Head Teacher Qualifications for Facilities Licensed for 3 - 12 Children

The director and/or head teacher must be at least twenty-one years of age, hold a current certification in first aid and Cardio Pulmonary Resuscitation (CPR) and meet the following requirements:

Twelve hours of training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care; and

Experience. At least six months experience working in a child care program or other children's program.

Director or Head Teacher qualifications for facilities licensed for 13-20 children.

The director and/or head teacher shall be at least twenty-one years of age and meet one

of the following:

High school: Graduation from an accredited high school or its equivalent and twelve months of employment in a licensed child care facility licensed for thirteen or more children or twelve months experience as the operator of a child care facility licensed for three to twelve (including family child care), and twelve hours training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development, child care, early childhood education, topics related to operating a child care facility, or other subjects related to the age or characteristics of children for whom care is planned.

College courses: Thirty credit hours of college courses including six credit hours in child care, child development, child care administration, behavioral sciences or closely related subjects and six months experience (employment or college practicum) in a child care facility licensed for 13 or more children) or six months experience (employment or college practicum) operating a child care facility for three to twelve children.

Credential: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.

Director and/or Head Teacher qualifications for facilities licensed for 21 - 49 children.

The director and/or head teacher shall be at least twenty-one years of age and meet one of the following:

Associate degree: An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education; or

AA/AS in related field: An AA/AS with twelve credits in Early Childhood Education or a related field and two years direct child care experience; or

College credit and experience: Thirty college credits in Early Childhood Education with one year direct child care experience; or

Credential and experience: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with three years direct child care experience; or

Experience and training: Five years direct child care experience and one hundred and thirty-five hours of training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care, early childhood education, topics related to operating a child care facility; or other subjects related to the age or characteristics of children for whom care is planned.

Directors and/or head teachers of School-Age child care Programs

Directors and/or head teachers shall have an AA/AS in Early Childhood Education or a closely related field such as elementary education, youth development, or recreation management or thirty college credits in Early Childhood Education or a closely related field, such as elementary education, youth development, or recreation management or Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with three years direct child care experience; or five years direct child care experience and one hundred and thirty-five hours of training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care, early childhood education, topics related to operating a child care facility; or other subjects related to the age or characteristics of children for whom care is planned.

Director and/or Head Teacher qualifications for facilities licensed for 50 or more children. The director and/or head teacher shall be at least twenty-one years of age and meet one of the following:

Degree in Early Childhood Education: A Bachelor of Science/Bachelor of Arts (BA/BS) in Early Childhood Education; or

Degree and experience: An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education and three years direct child care experience; or

AA/AS and experience: AA/AS in a related field with eighteen credit hours in Early Childhood Education and three years direct child care experience; or

BA/BS and experience: BA/BS in a related field with eighteen credit hours in Early Childhood Education and three years direct child care experience; or

Credential and experience: Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with five years direct child care experience; or

Experience and training: Seven years' experience and one hundred and eighty hours of training in healthy, safe environments, child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care, early childhood education, topics related to operating a child care facility; or other subjects related to the age or characteristics of children for whom care is planned.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

and assistant qualifications:

2. Toddler lead teacher

and assistant qualifications:

3. Preschool lead teacher

and assistant qualifications:

4. School-Age lead teacher

and assistant qualifications:

☑ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

A family child care provider must be at least eighteen years old.

Before receiving a Family Child Care certificate, the applicant must receive certification in adult child and infant cardiopulmonary resuscitation (CPR) and First Aid.

Before receiving a Family Child Care certificate, the applicant must take part in six hours of approved training in the operation of a family child care program.

Qualifications of the applicant: The applicant must demonstrate a willingness and ability to operate and manage the family child care program with mature judgment, compassionate regard for the best interests of children and consistent compliance with these rules and all relevant laws. In making this determination, the department shall consider each of the following factors to the extent that they are relevant:

Record and reputation for honest and lawful conduct in business and personal affairs: The applicant must, as part of the certificate application and renewal process, authorize the department to review the records of professional licensing boards or registers, any criminal record, child protective record, Out-of-Home Investigations Unit record or adult protective record necessary to determine compliance with these rules;

Conduct which demonstrates an understanding of, and compliance with, Rights for Children in family child care programs (Section 7 of these rules);

Information which relates to the ability or willingness to comply with all applicable laws and

rules;
Any information reasonably related to the ability to provide safe and developmentally appropriate child care.

d) Other eligible providers qualifications:
The Nursery School shall employ a minimum of one Director/Head Teacher. The Director/Head Teacher may be the operator or licensee.
Director/Head Teacher Qualifications for Nursery Schools Licensed for three to twelve children:
The Director and/or Head Teacher shall be at least twenty-one years of age, have a high school diploma or equivalent, and hold a current certification in first aid and CPR.
The director and/or head teacher shall meet the following:
Twelve hours of training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care; and have at least six months experience working in a child care program, Nursery School or other children's program.
Director/Head Teacher Qualifications for Nursery Schools Licensed for thirteen to twenty Children:
Director and/or head teacher qualifications: The Director and/or Head Teacher shall be at least twenty-one years of age, have a high school diploma or equivalent, and hold a current certification in first aid and CPR.
The director and/or head teacher shall meet one of the following:
1) Graduation from an accredited high school or its equivalent and twelve months of employment in a licensed Nursery School or child care facility licensed for thirteen or more children or twelve months experience as the operator of a Nursery School or child care facility licensed for three to twelve children (including family child care), and twelve hours training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development child care, early childhood education, topics related to operating a Nursery School, or other subjects related to the age or characteristics of children for whom care is planned.
2) Thirty credit hours of college courses including six credit hours in child care, child development, child care administration, behavioral sciences or closely related subjects and six months experience (employment or college practicum) in a Nursery School or child care

facility licensed for thirteen or more or six months experience (employment or college practicum) operating a Nursery School or child care facility for three to twelve children.
3) Child Development Associate (CDA) as awarded by the CDA National Credentialing Program.
Director/Head Teacher Qualifications for Nursery Schools Licensed for twenty-one to forty-nine children:
Director and/or head teacher qualifications. The Director and/or Head Teacher shall be at least twenty-one years of age, have a high school diploma or equivalent, and hold a current certification in first aid and CPR.
The director and/or head teacher shall meet one of the following:
1) Graduation from an accredited high school or its equivalent and twelve months of employment in a licensed Nursery School or child care facility licensed for thirteen or more children or twelve months experience as the operator of a Nursery School or child care facility licensed for three to twelve (including family child care), and twelve hours training in healthy, safe environments; child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development, child care, early childhood education, topics related to operating a Nursery School or child care facility, or other subjects related to the age or characteristics of children for whom care is planned;
2) Thirty credit hours of college courses including six credit hours in child care, child development, child care administration, behavioral sciences or closely related subjects and six months experience (employment or college practicum) in a child care facility licensed for thirteen or more children or six months experience (employment or college practicum) operating a child care facility for three to twelve children;
3) Child Development Associate (CDA) as awarded by the CDA National Credentialing Program;
4) An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education;
5) An AA/AS with twelve credits in Early Childhood Education or a related field and two years direct child care experience;
6) Thirty college credits in Early Childhood Education with one year direct child care experience;
7) Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with three years direct child care experience;
8) Five years direct child care experience and one hundred and thirty-five hours training in healthy, safe environments; child development; observation and assessment;

developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care; early childhood education; topics related to operating a Nursery School or child care facility; or other subjects related to the age or characteristics of children for whom care is planned.

Director/Head Teacher Qualifications for Nursery Schools Licensed for 50 or More Children:

Director and/or head teacher qualifications: The Director and/or Head Teacher shall be at least twenty-one years of age, have a high school diploma or equivalent, and hold a current certification in first aid and CPR.

The director and/or head teacher shall meet one of the following:

1) A Bachelor of Arts/Bachelor of Sciences (BA/BS) in Early Childhood Education;

2) An Associate in Arts/Associate in Science (AA/AS) in Early Childhood Education and three years direct child care experience;

3) AA/AS in a related field with eighteen credit hours in Early Childhood Education and three years direct child care experience;

4) BA/BS in a related field with eighteen credit hours in Early Childhood Education and three years direct child care experience;

5) Child Development Associate (CDA) as awarded by the CDA National Credentialing Program with five years direct child care experience; or

6) Seven years' experience and one hundred and eighty hours training in healthy, safe environments, child development; observation and assessment; developmentally appropriate practice; guidance; relationships with families; individual and cultural diversity or business and professional development; child care, early childhood education, topics related to operating a Nursery School; or other subjects related to the age or characteristics of children for whom care is planned.

Qualifications of other staff:

a) All staff shall be at least eighteen years of age.

b) All staff shall have a high school diploma or equivalent or be attending high school or be enrolled in a GED preparation program.

c) All staff shall demonstrate the following:

1) The ability and willingness to comply with all applicable laws and rules;

2) The ability to provide safe and compassionate services; and

3) A history of honest and lawful conduct.

Other staff requirements for Nursery Schools licensed for thirteen or more children.

If the Nursery School provides a kindergarten program, it must be staffed by a certified teacher.

The group leader or person having the primary responsibility for a group of children in a Nursery school with thirteen or more children shall be at least eighteen years of age and meet one of the following:
a) Child Development Associate (CDA) as awarded by the CDA National Credentialing Program;
b) Six months experience working in a Nursery School or child care facility licensed for 13 or more children; or
c) One year (30 credit hours) of college work including a course in a child related subject.

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

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

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a

natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016.

Provide a citation and a link if available

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Maine has included language requiring training in the ten topics in the draft Child Care Subsidy Rules and draft Child Care Licensing Rules.

Unmet requirement - Identify the requirement(s) to be implemented Precautions in transporting children (if applicable)

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contact with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for a year for those providers participating in QRIS.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

agencies, etc.)

Release a memo with new requirements and training tracks which will meet new rules.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented First aid and cardiopulmonary resuscitation (CPR) certification

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with the new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Prevention and control of infectious diseases (including immunization)

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure and contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participating in QRIS

Projected start date for each activity: 05/01/2016

Projected end date for each activity: 07/01/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with the new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Prevention of sudden infant death syndrome and use of safe sleeping practices

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay

CCDF funds to cover training costs for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with the new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Administration of medication, consistent with standards for parental consent

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with new requirements and training tracks which will meet the new rules.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Prevention of shaken baby syndrome and abusive head trauma

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Prevention of and response to emergencies due to food and allergic reactions

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participatingin QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with new requirements and training tracks which will meet new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

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

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Careto give access to all providers and pay CCDF funds for one year to cover training costs for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with the new requirements and training tracks which will meet the new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Conduct a public hearing on the Child Care Subsidy Rules

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Finalize and implement the new Child Care Subsidy Rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Secure a contract with Better Kids Care to give access to all providers and pay CCDF funds to cover training costs for one year for those providers participating in QRIS

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Release a memo with the new requirements and training tracks which will meet new rules

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

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

Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented pre-service (prior to initial service) or orientation (period from when service started) appropriate to the provider setting that address each of the requirements relating to the required topic areas

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

As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency will propose revisions to require health and safety and preservice training requirements for CCDF providers. The rules are expected to be finalized by August, 2016.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

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

Work with the Professional Development Network to host orientation training and create a collection of resources for child care providers to use in conducting orientation training with staff.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Division of Licensing and Regulatory Services

Unmet requirement - Identify the requirement(s) to be implemented ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the required topic areas

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

As part of the 2016 Child Care Subsidy rule-making process, the Lead Agency will propose to require training every five years in the CCDBG health and safety topics.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Division of Licensing and Regulatory Services

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

Work with the Professional Development Network to host health and safety training incoporating all CCDBG topics and create a collection of resources for child care providers.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-

Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Division of Licensing and Regulatory Services

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

☑ Nutrition (including age appropriate feeding).

Describe:

Licensed providers have health and safety requirements in the following areas: Child care centers and small facilities.

The facility shall serve well-balanced meals and snacks. Drinking water must be available to the children. Snacks shall be simple and nourishing and include items such as milk, fruit or fruit juice and crackers. Fruit juice or a milk substitute shall be offered to children prohibited from drinking milk for medical reasons. Lunch, which includes a beverage, shall consist of food from each of the following groups: Vegetables or fruit or both; Meat, poultry, fish, cheese, eggs, or protein substitute; Enriched bread or equivalent serving of cornbread, muffin, biscuit, pasta, noodles, rice, etc.; Milk as a beverage. Fruit juice or a milk substitute shall be offered to children prohibited from drinking milk for medical reasons.

Each lunch and dinner and breakfast plus a snack served shall provide one third of a child's daily nutritional requirements and meet the special dietary needs of each child. Food required by special diets may be provided by the center or may be brought to the center by the parents. Portions of food served shall be suited to the child's age and appetite. Information regarding children's allergies must be readily accessible to the food preparation staff, who will prepare food accordingly.

Family child care homes: The provider must serve well-balanced meals and snacks. The family child care program must serve meals and snacks that supplement food served at the child's home. An evening meal that meets nutritional requirements must be served at a regular time each evening and must be available to children who may arrive without having first eaten.

Nursery Schools: Any snacks served in the Nursery School shall be well-balanced and nutritious. Snacks shall be simple and nourishing and include items such as milk, fruit or

fruit juice and crackers. Fruit juice or a milk substitute shall be offered to children prohibited from drinking milk for medical reasons. Information regarding children's allergies will be readily accessible to staff, who will prepare food accordingly.

☑ Access to physical activity.

Describe:

Licensed providers have health and safety requirements in the following areas: Child care centers and small facilities.

All children shall have a minimum of thirty minutes out of doors each morning session and each afternoon session of more than three and one half hours or more, weather permitting. Indoor gross motor activity will be substituted for outdoor time when weather does not permit outdoor time.

Family child care homes: All children shall spend a minimum of thirty minutes out-of-doors for each morning session and each afternoon session of three and one half hours or more, weather permitting. Indoor gross motor activity must be substituted when weather does not permit outdoor time.

Nursery Schools: A sample daily activities schedule which shall be posted at the Nursery School. The schedule shall include the following as appropriate to the hours of operation: A period of time for indoor and outdoor activities. Indoor and outdoor activities shall be developmentally appropriate.

☐ Screen time.

Describe:

☑ Caring for children with special needs.

Describe:

Licensed providers have health and safety requirements in the following areas; Child care centers.

Reasonable modifications and accommodations: To afford individuals with disabilities the opportunity to participate in a child care program, the child care facility must act as follows:

The child care facility must make reasonable modifications to their policies and practices to include children, parents and guardians with disabilities, unless to do so would be a fundamental alteration of their program.

The child care facility must make the facility accessible to people with disabilities. Existing facilities must remove any readily achievable barriers, while newly constructed facilities and any altered portions of existing facilities must be fully accessible. If existing barriers can be easily removed without much difficulty or expense, licensees must remove those barriers immediately even if there are no children with disabilities using the program. (Installing offset hinges to widen a door opening, installing grab bars in toilet stalls, or rearranging tables, chairs or other furniture are all examples of readily achievable barrier removal.)

Right to be free from discrimination: A child shall be provided child care services without regard to race, age, national origin, religion, disability, sex or family composition.

Right to a service plan: Each child has the right to expect the licensee to assist him/her in implementing any reasonable plan of service developed with community or state agencies.

Family child care homes:

Reasonable modifications and accommodations: To afford individuals with disabilities the opportunity to participate in a family child care program, the program must act as follows:

The family child care provider must make reasonable modifications to program policies and practices to include children and parents with disabilities, unless to do so would be a fundamental alteration of the program.

The family child care provider must make the premises accessible to people with disabilities.

Existing family child care programs must remove any barriers when the removal can be readily achieved by the family child care program. If existing barriers can be easily removed without much difficulty or expense, providers must remove those barriers immediately even if there are no children with disabilities currently enrolled in the program (rearranging tables, chairs or other furniture are examples of readily achievable barrier removal).

Newly constructed family child care buildings and any altered portions of existing family child care buildings must be fully accessible.

Materials and equipment for children: Materials and equipment must be appropriate for children enrolled, including those with special needs.

Right to a service plan: Each child has the right to expect the provider to assist the child in implementing a reasonable plan of service developed with community or state agencies.

Nursery Schools:

Compliance with Americans with Disabilities Act standards: All Nursery Schools shall be in compliance with Americans with Disabilities Act (ADA) standards.

The licensee cannot require that the parent(s) of children with physical, emotional and/or mental disabilities furnish the Nursery School with information pertaining to the child's disabilities, but is encouraged to ask pertinent developmental questions of all children prior to entrance to ensure appropriate and successful programming.

A Nursery School must ensure that all staff are adequately trained and/or have sufficient experience to meet the needs of all children for whom they are responsible.

Reasonable modifications and accommodations: To afford individuals with disabilities the opportunity to participate in a Nursery School program, the Nursery School shall act as follows:

The Nursery School must make reasonable modifications to their policies and practices to include children, parents and guardians with disabilities, unless to do so would be a fundamental alteration of their program.

The Nursery School must make the Nursery School accessible to people with disabilities. Existing Nursery Schools must remove any readily achievable barriers, while newly constructed Nursery Schools and any altered portions of existing Nursery Schools must be fully accessible. If existing barriers can be easily removed without much difficulty or expense, providers must remove those barriers immediately even if there are no children with disabilities using the program. (Rearranging tables, chairs or other furniture are all examples of readily achievable barrier removal).

Materials and equipment for children: Materials and equipment shall be appropriate for children enrolled, including those with special needs.

☑ Recognition and reporting of child abuse and neglect.

Describe:

The facility must make all childcare personnel aware of their status and responsibility as mandated reporters to the Department of Health and Human Services when there is reasonable cause to suspect abuse or neglect of a child under the age of eighteen. When reports are made in good faith, reporters are immune from civil or criminal liability for the act of reporting or participating in the investigation or proceeding. The department will respect a reporter's request for confidentiality to the extent possible. The identity of reporters will not be revealed unless required to protect the child from serious harm.

The facility must adopt written policy for handling suspected instances of child abuse or neglect in accordance with Maine law. The facility staff shall cooperate in the investigation of allegations of abuse and neglect.

☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.

Describe:

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements.

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

☑ Yes, all relatives are exempt from all health and safety training requirements.

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

Relative providers are exempt from health and safety training requirements however still have full access to all training and professional development resources. In order to participate in the Child Care Subsidy Program, relative providers must sign a provider agreement and a supplemental health and safety checklist where they self-certify they are in compliance with major health and safety requirements.

☐ Yes, some relatives are exempt from health and safety training requirements.

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

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

5.2 Monitoring and Enforcement Policies and Practices

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

☑ Yes.

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

The Maine Child Care Subsidy Program Rules, 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 2.02 Child Care Subsidy, ensure that subsidies are only paid to child care providers that are:

a. A child care facility licensed by the Department and enrolled in either active or waiver status in the Maine Child Care Quality Rating and Improvement System (QRIS), Quality for ME
b. A family child care licensed by the Department and enrolled in either active or waiver status in the Maine Child Care Quality Rating and Improvement System (QRIS), Quality for ME
c. A legal, unregulated provider
d. An in-home child care provider
e. A Recreational Program
f. A New Hampshire regulated child care provider licensed by New Hampshire
g. A relative child care provider

In order to receive and maintain a license in the State of Maine, providers must comply with health and safety standards set forth in Maine Revised Statute Title 22: Health and Welfare. License-exempt providers receiving CCDF funds must meet health and safety requirements as stated in 10-148 DHHS Office of Child and Family Services Chapter 6 Child Care Subsidy Program Rules Section 7.04.2.

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

Implementation Plan summary report.

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

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

☑ Yes.

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

All licensors employed by DLRS undergo comprehensive onboarding and orientation training. Licensors are versed in all areas of licensing rules and regulations and health and safety requirements. The training consists of a series of staff meetings, training sessions and peer mentoring opportunities including a mandatory Language Access session.

In December 2015 all licensors will be trained in and certified in the National Association for Regulatory Administration (NARA) training. DLRS is developing a draft algorithm to drive the frequency of licensing visits based on compliance with key indicators and degree of risk to children (differential monitoring).

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

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☐ Yes.

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

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

Overall Target Completion Date (no later than November 19, 2016) 11/19/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if

applicable

Maine State Statute and Child Care Licensing Rules governing the operations of licensed child care centers and certified providers guarantee that facilities comply with licensing and health and safety requirements. Following receipt of a complete application for a license to operate a child care facility, a representative of the department will conduct an inspection of the facility, its policies, and program to evaluate compliance with applicable rules adopted by the Department of Health and Human Services. The department must make at least one unannounced inspection of the child care facility licensed under Title 22 M.R.S.A. chapter 1673 during the term of the license. The inspection must take place between 6 and 18 months after the issuance of the license. This rule will need to be ammended to be in compliance.

Unmet requirement - Identify the requirement(s) to be implemented require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time.)

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

This will require a Child Care Licensing Rule Change. The rules are currently in draft form under legal review. They will then go through the public hearing process and then be implemented.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 09//3/0/2016
Agency - Who is responsible for complete implementation of this activity
Division of Licensing and Regulatory Services (DLRS)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Office of Child and Family Services (OCFS)

Office for Family Independence (OFI)

c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)**) - It will have policies and practices that require licensing inspectors (or qualified monitors

designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes.

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

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

Overall Target Completion Date (no later than November 19, 2016) 11/19/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

An Implementation Team made up of the Division of Licensing and Regulatory Services (DLRS) and the Office of Child and Family Services (OCFS) and Office for Family Independence (OFI) all residing within the Lead Agency is meeting regularly to oversee the implementation of monitoring of Licensed-Exempt CCDF providers. A draft health and safety checklist is being established for use during monitoring visits.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B))).

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

Designated DLRS employees will need to be trained to conduct inspections of Licensed-Exempt CCDF providers

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

DHHS-Office for Family Independence

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

The health and safety checklist to be utilized by DLRS in monitoring Licensed-Exempt CCDF providers will need to be finalized

Projected start date for each activity: 11/01/2015
Projected end date for each activity: 05/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

DHHS-Office for Family Independence

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

An addition will be added to the Child Care Subsidy provider agreement for license-exempt providers to include requirements to allow inspections as part of being a CCDF provider.

Projected start date for each activity: 01/08/2016
Projected end date for each activity: 06/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-

Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Division of Licensing and Regulatory Services

DHHS-Office for Family Independence

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

☑ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

The practice of the Division of Licensing and Regulatory Services (DLRS) is to maintain a provider to licensor ratio of 80:1.

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

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):

All child care personnel operating or working at a licensed child care facility, home, or nursery school are mandated reporters under Title 22: HEALTH AND WELFARE Chapter 1071: Child and Family Services and Child Protection Act-Child Care Personnel are Mandated Reporters and required by law to "immediately report or cause a report to be made to the department when the person knows or has reasonable cause to suspect that a child has been or is likely to be abused or neglected or that a suspicious child death has occurred." Maine licensing standards require that all licensed facilities make all child care personnel aware of their status and responsibilities as mandated reporters. All License-exempt CCDF providers are required to sign a provider agreement certifying they will comply with Mandated Reporting laws.

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

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☑ Yes, all relatives are exempt from all inspection requirements.

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

Relative providers are exempt from inspection requirements however still have full access to all training and professional development resources including onsite technical assistance. In order to participate in the Child Care Subsidy Program, relative providers must sign a provider agreement and a supplemental health and safety checklist where they certify they are in compliance with major health and safety requirements. Additionally, relative providers are required to comply with background check requirements set forth in the Child Care Subsidy Program rules.

☐ Yes, some relatives are exempt from inspection requirements.

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

☐ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

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

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.
Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement

that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.
Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.
Transparency - The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.
Appeals process - The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.
Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

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

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

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

Overall Target Completion Date (no later than September 30, 2017) 09/30/2017

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The Maine DHHS Division of Licensing and Regulatory Services is currently responsible for conducting background checks for center and Nursery School

Directors along with all family child care providers. These checks include State Bureau of Investigation, Bureau of Motor Vehicles, Child Welfare, and Maine Sex Offender Registry. The Maine DHHS Office of Child and Family Services is responsible for conducting background checks for the unlicensed providers who receive CCDF funds and the Maine DHHS Office for Family Independence is responsible for conducting background checks for TANF funded child care services. These checks include State Bureau of Investigation, Bureau of Motor Vehicles, child welfare, and Maine Sex Offender Registry. As part of the new child care system Maine will have a coordinated and consistent approach to conducting background checks on child care staff members.

Unmet requirement - Identify the requirement(s) to be implemented. Includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years.

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and

Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. A process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

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

Child Care Subsidy Rules public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

agencies, etc.)

Comprehensive background check system development including appeal process and procedures

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. National Crime Information Center (run by the FBI)

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of the comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

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

Comprehensive background check system development including NCIC

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

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

adult against a child.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017

Projected end date for each activity: 11/01/2017

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. 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.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background checks

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

agencies, etc.)

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of the comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rules public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and

Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years,

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

agencies, etc.)

Comprehensive background check system development.

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementatino of comprehensive background check program.

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. FBI fingerprint check using Next Generation Identification

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and

Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. Requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of a comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rules public hearing and implementation to include all components of a comprehensive background check.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. Not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09//3/0/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017

Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of a comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years;

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

Child Care Subsidy Rule public hearing and implementation to incorporate checking the sex offender registry as part of the comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. National Sex Offender Registry.

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

Child Care Subsidy Rule public hearing and implementation to incorporate sex offender registry check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. Conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request.

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of the comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Serivces

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

Phase-in implementation of comprehensive background check program

Projected start date for each activity: 03/01/2017

Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

Unmet requirement - Identify the requirement(s) to be implemented. Ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website

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

Child Care Subsidy Rule public hearing and implementation to incorporate all components of comprehensive background check

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Licensing Rule public hearing and implementation to include all components of a comprehensive background check

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Comprehensive background check system development

Projected start date for each activity: 12/01/2014
Projected end date for each activity: 12/01/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office of Child and Family Services

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

Phase-in implementation of comprehensive background check program including posting policies and procedures on consumer education website

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services
DHHS-Division of Licensing and Regulatory Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Indpendence

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

Describe:

Maine received a grant from Centers for Medicare & Medicaid Services (CMS) in order to

identify efficient, effective, and economical procedures for conducting background checks for direct service long-term care providers. The comprehensive new law creates an online single-portal Background Check Center (BCC) to screen individuals working in direct access positions with Maine's children, elders, and disabled citizens receiving care and support. The Maine DHHS will operate the BCC in coordination with the Maine Department of Public Safety (DPS), State Bureau of Identification and with other state and federal partners. The CCDF Lead Agency is partnering with the new Maine Background Check Center in order to meet the new requirements of CCDBG. The Maine Background Check Center will have an automated Name and DOB search criminal history record check. Child care providers will gain access to this system in 2017 after a rollout to the Long-term Care Industry in 2016. Public education, fee structure, and phase-in will mirror the rollout to Long-term care providers. Name-based background checks for Maine State Rapback are currently under development and will also be part of the system. Rapback is a mechanism that allows the Background Check Center to immediately inform the employer of any new criminal history record information against an employee that arises after the employee's pre-employment background check is completed.

The enabling legislation, LD 1439 , PUBLIC Law , Chapter 299, An Act to Establish a Secure Internet-based Background Check Center for Providers of Long-term Care, Child Care and In-home and Community-based Services, authorizes DLRS to set the list of disqualifying offenses (including state and federal mandated civil and criminal offenses) through technical rule making. Maine's legislation package included an amendment which outlined the proposed independent waiver process for Maine's Background Check Center. The amendment as incorporated was passed in 2015 during the 127th Maine Legislative Session as a key component of the enabling background check legislation. DHHS DLRS has begun to identify and implement adjustments to its existing appeal processes, based on the new legislation. DLRS has begun to develop and implement manual work processes and automated technical build flows and processes based on the new legislation. The Maine Background Check Center project is building technical system interfaces to develop and implement an efficient, integrated and automated system for pre-employment registry checks. System features include

Petition for Waiver of Disqualifying Conviction - In the event that no other federal or state law mandates an employment prohibition, an employer that would like to pursue employing an otherwise disqualified employee can support a request for a department waiver of the employment ban.

Eligibility Report and Conditional Employment - the BCC generates a comprehensive, easy-

to-understand report that notifies employers when an individual is disqualified for employment. A disqualifying report discloses information sufficient for the employer to make employment decisions consistent with federal and state law, and for the applicant to challenge any inaccuracies (Errors Correction). Applicants challenging the report can be conditionally employed during the errors correction process. Conditional employment procedures will be outlined for providers needing to hire prior to receiving the BCC results.
Confidentiality - Any personally identifiable information and criminal history records are confidential. Employers may only use the limited information provided by the BCC to determine eligibility of an individual for new or continued employment. The confidential information or background check record may not be disseminated to anyone other than the employee.
User Fees - Fees will reflect Employer cost-savings and program sustainability associated with the efficiency of one-stop access to an integrated, comprehensive background check. Secure electronic payment (e-check; credit card). Child care providers will have access to a staged, phased-in fee schedule to provide a smooth transition and consideration for current employees in the field . Child care providers who serve children in the Child Care Subsidy Program will be eligible for a reduced fee.

Dynamic interaction - between Employers and the BCC is a key feature of the system. Employers create an online account to organize and track the background check status for all employees. The BCC features deadlines, emails reminders and reports to help employers with compliance and records management.
The BCC process - Employers begin with a *'free quick check'* feature to screen applicants on public registries that list people already potentially ineligible for employment, such as the Medicare and Medicaid list of excluded persons, Maine Certified Nursing Assistant and Direct Care Worker Registry, and National Sex Offender Public Website, in addition to Maine's professional licensing database.
Quick check results - are returned within minutes. Employers can use these results to decide whether to proceed with the 'full background check' and obtain a criminal history record from the DPS State Bureau of Identification.
'Full Background Check' - The full background check screens individuals further to rule out disqualifying criminal convictions or substantiated findings of abuse, neglect and exploitation of adults and children.
New event monitoring - the BCC will provide automatic 'registry rechecks' to employers on their current employees. The system also utilizes a unique criminal records monitoring

feature to solve a problem all employers face regarding mandatory background checks - the need and costs associated with repeat background checks after an individual is hired.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states

Describe:

The Maine Background Check Center will have a quick check feature which will allow members of the public, including entities located out-of-state, to search public records. Identification Specialists will be available to assist with requests beyond the quick search function.

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

☐ Yes.

Describe:

☑ No.

5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☑ Yes.

Describe:

The Child Care Subsidy Program disqualifies child care providers and staff members from participating in the Child Care Subsidy Program for all of the above-listed convictions including;

- A conviction for an OUI or driving to endanger within the last three years. The Department may approve Child Care Subsidy if another adult in the household (not the child care provider) is found to have this conviction and he or she signs a written agreement not to drive the children receiving a Child Care Subsidy.
- More than one OUI conviction, with the latest conviction in the last five years.
- Three or more convictions in the last five years for speeding in excess of twenty miles per hour over the speed limit by the child care provider or anyone

designated to drive the children in care. The Department may approve Child Care Subsidy if the child care provider signs a written agreement not to drive the children in his or her care.

☐ No.

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?

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

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

Describe.

☑ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.

Lead Agencies can report that no fees are charged if applicable:

Describe.

In the Maine Background Check Center (BCC) program fees will be charged to consumers in order to sustain the BCC. Fees charged will not exceed the actual cost of processing and administration. Fees will reflect employer cost-savings and program sustainability associated with the efficiency of one-stop access to an integrated, comprehensive background check. Secure electronic payment (e-check; credit card). Child care providers will have access to a staged, phased-in fee schedule to provide a smooth transition and consideration for current employees in the field. Child care providers who serve children in the Child Care Subsidy

Program will be eligible for a reduced fee.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

Public education about the Maine Background Check Center (BCC) is a major focus of the new system implementation. Frequently asked questions will be posted to the consumer education and Lead Agency website and shared with the public in various other venues. Staff will be trained and able to answer questions and refer consumers to Identification Specialists at the BCC. A phase-in fee schedule and timeline as well as a visual representation of disqualifying offenses will also be posted and shared. The State Administrator in partnership with DLRS will share BCC details with stakeholder groups and the PDN will share information with new and existing providers.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes.

List types of crime included in the aggregated data:

☑ No.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

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

apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

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

6.1 Training and Professional Development Requirements

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

The State/Territory also must develop and implement strategies to strengthen the business

practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

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

6.1.1 Describe the status of the State's training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

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

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

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

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

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

☑ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individualto build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and

best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:

☐ State/Territory professional standards and competencies.

Describe.

☑ Career ladder or lattice.

Describe.

The MRTQ PDN currently has career lattices in place for direct care staff in family child care, center-based care, and school age care. Each Lattice is based upon training, experience and education. There are also career lattices for Administration/Supervisory Staff (Directors), Social Service Staff (Home Visitors) and Maine will explore how to integrate Department of Education for Public Pre-k staff as well. Additionally, MRTQ offers career planning to all practitioners who request it. All practitioners have access to their own Professional Development Profile (PDP) through the MRTQ registry. The PDP houses all the training, credentials, TA hours etc. that an individual has utilized. Scholarships for CDA, undergraduate and graduate courses as well as doctorate courses are available to those practitioners who apply and are income eligible.

☑ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

MRTQ PDN currently has articulation agreements with all eight community colleges for the 180 hour core knowledge training to ensure credit hours are given for completion of MRTQ core knowledge trainings. The community colleges subsequently have articulation agreements with the University System providing a streamlined path for providers to higher education degrees and certificates. In addition to having articulation agreements for core knowledge trainings, MRTQ has agreements with Central Maine Community College (CMCC) for all Credentials. CMCC maintains a grid of MRTQ credentials which outlines what each Credential is translated to in college credits in their system. This practice was recently presented to the Higher Education Committee with a goal of increasing participation among higher education in this practice.

☑ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

The Maine Roads Core Knowledge Training Program offers a wide range of approved training in the following core knowledge areas: healthy safe environments, observation and assessment, child development, developmentally appropriate practice, guidance, relationships with families, individual and cultural diversity, and business and professional development. The approved Core Knowledge Training assures a consistent body of knowledge in early care and education for new and experienced practitioners. The Core Knowledge Training can be used to meet CDA training requirements . It is also possible to receive college credit from completing the 180-hour sequence. T he Maine Roads Core Knowledge Training Program provides training which meets training requirements for state licensing, the Child Development Associate (CDA) credential, Continuing Education Units (CEUs), National Accreditation Associations and ongoing professional development.

MRTQ also facilitates and supports Child Care Provider Communities of Practice (CoPs). MRTQ connects and funds trained facilitators to work with groups of providers in the provider's local community. A rea providers meet regularly to network, get support, and share information with one another. This Community of Practice is designed to be planned and driven by the interests and needs of the providers.

☐ Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

☑ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.

Describe.

The MRTQ PDN is funded through Maine's DHHS Office of Child and Family Services. The Lead Agency meets regularly with PDN staff to ensure contract outcomes are met in addition to reviewing quarterly reports on deliverables. Additionally, MRTQ holds a seat on the CCAC. MRTQ also has its own advisory structure which meets quarterly to review professional development needs and interests statewide. The State Administrator sits on the MRTQ advisory council.

☑ Continuing education unit trainings and credit-bearing professional development.

Describe.

The PDN is situated within the University of Maine system and, as such, CEUs for core knowledge training are available at no cost. Additionally, CEUs can be offered through the University for all Conferences and symposiums that meet requirements.

☐ State-approved trainings.

Describe.

☐ Inclusion in state and/or regional workforce and economic development plans.

Describe.

☐ Other.

Describe.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC

Describe.

The MRTQ was awarded the contract to deliver of Maine's Early Care and Education Professional Development Network through a competitive bid process in 2012. MRTQ and its partners in the network including the University of Maine's Child Care Choices Referral Database, Quality for ME (Maine's Quality Rating and Improvement System), and the Center for Community Inclusion and Disability Studies (CCIDS) meet the professional development, technical assistance/inclusion, child care subsidy, quality improvement and referral needs of ECE providers. MRTQ holds a seat on the Maine Children's Growth Council, the Child Care Advisory Council (CCAC) and SAIEL and attends both meetings regularly. SAIEL and the Child Care Advisory Council are made up of many stakeholders who provide continuous feedback and support for the innovation of the PDN. MRTQ gives project updates at each CCAC meeting and utilizes the group for ongoing input. Additionally, MRTQ and the Department of Education co-chair the Professional Development Alignment Team where many statewide entities and agencies are present to ensure collaboration and consistency in providing professional development opportunities to meet the needs of early care and education providers statewide. MRTQ specialized credentials include: Infant-Toddler, Youth

Development, Inclusion and Director.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Describe.

The MRTQ PDN incorporates knowledge and application of the State's Early Learning and Development Standards and Health and Safety Standards by collaborating on the Early Learning and Development Standards (ELDS) Committee which includes partners such as Department of Education, Higher Education, Maine's CDC, and CCIDS to ensure that current research and best practices are incorporated into the PDN curricula. New curricula are written and others are revised to meet the new Early Learning and Development Standards. New curricula related to social-emotional behavior and intervention have been included as part of Maine's Inclusion Credential. Additionally, the PDN is working with the Maine CDC as part of their Physical Activity and Nutrition (PAN) Council to update training in the areas of Health and Safety. All of these collaborating entities are part of a team working to provide recommendations to the Lead Agency on revisions to QRIS. These recommendations include new health and safety standards and social-emotional development and inclusion language.

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

Describe.

The PDN contracts with Master's Degree Level Trainers throughout Maine. In order to ensure delivery to all counties and interested parties statewide. Often, trainers in specific areas such as those with tribal lands or English language learners take great care in learning the culture and communities in which they train. If trainers need assistance meeting the community need, translators and/or community members are asked to aid in training delivery to make it applicable and valuable for all.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

Describe.

MRTQ has developed curricula to meet the needs of child care and early education providers who work in a variety of settings, as well as with various age groups. Trainings are developed in specialty topics for specific age groups, based upon new research in the field of early care and education, as well as needs assessments of early care and education providers. Maine will send the needs assessment to the tribal administrators and solicit their specific professional development needs. PDN Registry members delineate work settings and ages served as part of their registry profile, so that trainings can be targeted, adapted and marketed. In addition, accommodations are made to ensure equal access for all including hiring of translators, in accordance with DHHS policy, and training and professional development opportunities are included in mailings to subsidy providers (including FFN) in order to reach a wider audience. Maine has many specialized credentials including the Infant/Toddler, Youth Development, Director and Inclusion. The PDN also offers an inclusion warm line which is a single point of contact for providers and families regarding behavioral issues. This then opens up to a system of supports relating to inclusion and serving children with disabilities. It includes technical assistance over the phone and in-person, training and consultation. Maine will send invitations to each of the tribes to share information about MRTQ to ensure they are aware of the scope of the services available within the PDN and to inform the training menu going forward.

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

☑ Financial assistance for attaining credentials and post-secondary degrees.

Describe.

Scholarships are available to practitioners who are working in the field of Early Childhood Education (ECE) if they meet income eligibility. These scholarship funds can be used to

obtain a CDA, a 2 or 4 year ECE degree or a PHD. in ECE. This program is administered through Maine Roads to Quality Professional Development Network. MRTQ-PDN also offers training and cohort support for practitioners to obtain age specific or content specific state credentials; Infant -Toddler Credential, Youth Development Credential, Director Credential, and Inclusion Credential. The State credentials are in the process of becoming articulated into MaineÂ¿s Community College system.

☐ Financial incentives linked to education attainment and retention.

Describe.

Â

☐ Registered apprenticeship programs.

Describe.

Â

☑ Outreach to high school (including career and technical) students.

Describe.

MRTQ-PDN works closely with the High School Technical schools that offer an ECE program. Students become registry members. The technical schools embed the Early Learning Guidelines into their curricula (soon to embed the Maine Early Learning and Development Standards). MRTQ tracks the students at the technical high school who obtain a Certified Early Childhood Assistant credential.

☐ Policies for paid sick leave.

Describe.

Â

☐ Policies for paid annual leave.

Describe.

Â

☐ Policies for health care benefits.

Describe.

Â

☐ Policies for retirement benefits.

Describe.

Â

☑ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services).

Describe.

The MRTQ PDN offers ongoing training and technical assistance to early care and education providers that meets the needs of a variety of providers ranging from those who are new to the field, to higher-level trainings such as leadership trainings for directors. Opportunities for training and technical assistance are assessed bi-annually and evaluated to ensure that they reflect current research and knowledge of best practice.Â PDN technical assistance providers have access to a range of resources and materials including national best practice guidance. Mental health TA is available. Many trainings offered through the PDN use the reflective practice approach. MRTQ offers a Stress or Eustress training as well as trainings that are part of the inclusion credential that addresses these issues. MRTQ plans to partner with the Maine Resilience Building Network (MRBN) to offer training on adverse childhood experiences (ACEs) to technical assistance staff in addition to providers.

☑ Other.

Describe.

Maine provides a percentage increase in payments on behalf of families receiving subsidy for providers who are at various steps on the Quality Rating and Improvement System.Â The higher quality the program is the more incentive or quality bump funds they receive. This incentivizes programs to move up the QRIS and also provides increased funding to allow the program to sustain their high-quality program and provide competitive wages and benefits to staff.Â Â

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

Describe.

The Lead Agency ensures that translators are available to all consumers and providers at no cost for all phone and in-person interactions. The Lead Agency conducts ongoing reviews of the primary language data to determine translation and workforce needs.

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

☑ Informational materials in non-English languages

☐ Training and technical assistance in non-English languages

☐ CCDF health and safety requirements in non-English languages

☐ Provider contracts or agreements in non-English languages

☐ Website in non-English languages

☑ Bilingual caseworkers or translators available

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

☐ Other.

Describe.

☐ None

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

The state has the ability to have translation/interpretation in all primary and secondary languages.

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

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

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

☑ No. The State/Territory must provide a State/Territory-specific implementation plan for

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The MRTQ PDN offers ongoing training and technical assistance to early care and education providers that meets the needs of a variety of providers ranging from those who are new to the field, to higher-level trainings such as leadership trainings for directors. Opportunities for training and technical assistance are assessed bi-annually and evaluated to ensure that they reflect current research and knowledge of best practice. PDN technical assistance providers have access to a range of resources and materials including national best practice guidance on serving children and families who are homeless. These resources include videos, tip sheets, consultation with the Center for Community Inclusion and Disability Studies and federal program guidance and technical assistance. All TA is free and providers can request and receive TA on any topic. Additionally, the Truancy, Dropout, Alternative Education and McKinney-Vento State Coordinator attends SAIEL meetings to discuss system coordination.

Unmet requirement - Identify the requirement(s) to be implemented Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families

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

Meet with the Professional Development Network to analyze the best way to deliver training and outreach on identifying and serving homeless children and families and develop a technical assistance protocol

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 07/31//2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

DHHS-Division of Licensing and Regulatory Services

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

Release a memo related to the availability of training and technical assistance on identifying and serving homeless children.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity DHHS-Office of Child and Family Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

DHHS-Office for Family Independence

DHHS-Division of Licensing and Regulatory Services

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

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

6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☑ Yes, If yes,

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

Performance measures for use of quality CCDF funds are outlined in the Professional Development Network contract and include:

- 10% increase of unique users for the Child Care Choices website;
- 55% of licensed ECE providers will participate in QRIS (baseline of 51%-1,817 providers with 910 participating);
- Establish a baseline of the ECE provider workforce and measure biannually for change, with a goal to maintain stability;
- MRTQ Advisory Council will meet quarterly and provide detailed minutes to council members within five (5) business days 100% of the time;
- 100% of available scholarships will be awarded annually;
- Attend 100% of all meetings with collaborating organizations.

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

☑ CCDF funds.

Describe:

CCDF quality funds are used to support the PDN which provides training and technical assistance to all providers, not just those who accept subsidy.

☑ Other funds.

Describe:

Some private funds are also used including Educare and J.T. Gorman Foundation. Additionally, Maine DOE has also contributed to support the PDN.

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

☑ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

MRTQ PDN has developed specific trainings based upon ELDS entitled "Supporting Maine's Infants and Toddlers: Guidelines for Learning and Development." Since 2007, Maine has offered a 30 hour training based upon guidelines for learning and development for children ages 3-5 titled "Maine's Early Learning Guidelines". In 2015, through collaboration with Maine Department of Education resulted in revised guidelines for ages 3-5 which are now titled "Maine Early Learning and Development

Standards" and are research-based and incorporate child development best practices relating to social, emotional, physical development, nutrition and cognitive development. A cross-system 30 hour training on the ELDS will begin in March, 2016. Follow-up technical assistance is available to all providers on any topic through Maine's Professional Development Network (PDN). Inclusion specialists are available to ensure that activities are inclusive of children with various needs.

☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

MRTQ currently offers 30 hours of sequenced training on supporting children's social-emotional growth from birth to age eight, and 18 hours focused in the social-emotional growth of infants and toddlers. MRTQ TA specialists also respond to requests for on-site assistance to programs and providers who need help in promoting children's social-emotional growth and reducing challenging behavior . MRTQ operates an Inclusion Warm Line which serves as a first step in providing practical and accurate information to support the successful inclusion of children with special needs, disabilities, mental health needs and concerning/challenging behavior in child care and early learning programs. If the provider requires in-person assistance with behavior management, curriculum planning, or mental health concerns technical assistance professionals are dispatched for on-site support.

Maine's Child Care Licensing staff frequently refer providers to the PDN for support around behavior management or environmental strategies. When a Conditional Licensed is issued, Child Care Licensing may require TA as part of a corrective action plan.

A cross-sector group of stakeholders involved in a larger initiative of the Maine Children's Growth Council (MCGC) will be engaged in developing a pilot Early Childhood Mental Health (ECMH) consultation initiative that reflects evidence-based practices. It is expected that the model would be developed in 2016 and implemented in 2017. A key feature would be close coordination between early childhood mental health consultation services and MRTQ's professional development and on-site coaching and technical assistance. For example, consultants would participate in

selected training sessions in order to familiarize programs with consultation services and contribute expertise, while coaches would receive guidance from consultants that would in some cases reduce the need for consultant visits to a program.

☐ 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:

☑ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.
Describe:
MRTQ PDN has developed specific trainings based upon MELDS entitled "Supporting Maine's Infants and Toddlers: Guidelines for Learning and Development." Since 2007, Maine has offered a 30 hour training based upon guidelines for learning and development for children ages 3-5 titled "Maine's Early Learning Guidelines". In 2005, through collaboration with Maine Department of Education resulted in revised guidelines for ages 3-5 which are now titled "Maine Early Learning and Development Standards"and are research-based and incorporate child development best practices relating to social, emotional, physical and cognitive development. MRTQ will continue to offer the current Maine's Early Childhood Learning Guidelines training through fall and winter 2015. This training will continue to meet the requirements at Steps 3 and 4 of Quality for ME. A new 30-hour training on the MELDS is scheduled to be available through MRTQ in the spring of 2016. This training was piloted during the fall of 2015 in three areas of the state. For providers who took the original Maine's Early Childhood Learning Guidelines, abbreviated "bridge" training will also be available in spring 2016. Follow-up technical assistance is available to all providers on any topic through Maine's Professional Development Network (PDN). Inclusion specialists are available to ensure that activities are inclusive of children with various needs.

☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.

Describe:

☐ Using data to guide program evaluation to ensure continuous improvement.
Describe:

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

☑ Caring for and supporting the development of children with disabilities and developmental delays.
Describe:
MRTQ operates an Inclusion Warm Line which serves as a first step in providing practical and accurate information to support the successful inclusion of children with special needs, disabilities, mental health needs and concerning/challenging behavior in child care and early learning programs. If the provider requires in-person assistance with behavior management, curriculum planning, or mental health concerns technical assistance professionals are dispatched for on-site support. Maine's Child Care Licensing staff frequently refer providers to the PDN for support around behavior management or environmental strategies.
☑ Supporting positive development of school-age children.
Describe:
The PDN offers a Youth Development Certificate for practitioners working with School Age youth at the community college level which aids school age practitioners to move up on the career lattice, grow their skills to better support school-age children and ultimately provide higher-quality care as evidenced by moving up on Maine's QRIS, Quality for ME. In addition, this Certificate provides an opportunity for advanced coursework and professional growth to these practitioners. Scholarships are made available to support practitioners in completing the certificate program.
☐ Other.
Describe:

d) Check how the State/Territory connects child care providers with available Federal

and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- [x] Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- [x] State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- [x] Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education
- [ ] Other.

Describe:

- [ ] No.

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?

States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

- [x] Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

Currently there is no orientation or pre-service requirement for licensed center-based care. As part of the Child Care Subsidy Rule -revision process in 2016-In order to receive CCDF subsidy a provider must participate in orientation training that is comparable to the family child care orientation and be able to show proof, upon request, of training in the ten Health and Safety topics.

2) Number of on-going hours and any required areas/content

According to Child Care Licensing rules, s taff scheduled to work 20 hours or less per week must have 18 hours of training per year. Staff scheduled to work more than 20 hours per week must have 30 hours of training per year.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

2) Number of on-going hours and any required areas/content

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

According to current Child Care Licensing rules: Before receiving a Family Child Care certificate, the applicant must take part in six (6) hours of approved training in the operation of a Family Child Care Program.

2) Number of on-going hours and any required areas/content

According to Child Care Licensing rules, after the first year of operation and each following year, the provider and staff must participate in a minimum of twelve hours of training in child care and early education topics or other topics related to the operation of a family child care program. The provider must have written proof that the provider and staff completed the training.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

Currently there is no orientation requirement for license-exempt providers. As part of the CCSP rule revision they will be required to participate in orientation training.

2) Number of on-going hours and any required areas/content

Currently there are no training requirements for license-exempt providers. As part of the CCSP rule revision they will be required to participate in training of the ten health and safety topics.

☐ No

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

☑ Fully implemented - as of March 1, 2016.

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

MRTQ PDN offers a variety of trainings that address techniques to strengthen providers business practices. These trainings include Operating a Family Child Care Business, Getting Started in Family Child Care, Partners in Caring Leadership I, Leadership II, and Leadership III institutes. All of these trainings are offered on a regular schedule. In addition the formal trainings providers can request and receive TA on any topic including business practice strategies. Inclusion specialists are available to ensure that activities are inclusive of children with various needs.

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:

Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

☑ The State assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency

The State of Maine Early Childhood Learning Guidelines (MELG) began with a workgroup in 2002 and was the result of national legislative initiatives - the No Child Left Behind Act, Good Start Grow Smart, and the Head Start Child Outcomes Framework - in order to strengthen school readiness efforts across local, state and federal early care and education systems. Following a rigorous review and pilot training series, the State of Maine Early Childhood Guidelines outlined what children need to succeed socially, emotionally, physically and intellectually, and was designed to guide best practice in the field. The 2005 edition of the MELG was endorsed by both the Maine Department of Education and the Maine Department of Health and Human Services, and has been embraced by numerous cross-sector early

childhood professionals. The State of Maine Early Childhood Learning Guidelines set the tone for collaboration across departments and programs. Since the 2005 implementation of the original document, the State of Maine Early Childhood Learning Guidelines have been embedded in Maine law governing public preschool, Quality for ME-QRIS (Maine's Quality Rating and Improvement System), and early childhood teacher preparation programs in higher education. Supporting Maine's Infants and Toddlers: Guidelines for Learning & Development (birth to 3), Maine's Early Childhood Learning Guidelines (3-5) and Maine's Learning Results (K-12) create a seamless connection of standards from birth - third grade and beyond. Further revision became necessary in order to ensure Maine's preschool standards remained in alignment across all facets of early childhood programming. These revisions took place in 2015 and were influenced by a number of important factors including: 1) ongoing federal direction for states to develop a comprehensive unified early childhood system; 2) the revision of the Head Start 8 Outcomes Framework and Maine's College and Career Ready Standards; 3) the growing emphasis on supporting early childhood educators in the use of research-based practice; and 4) the focus on school readiness and child outcomes. As a result of the revisions, the MELGs are now referred to as the Maine Early Learning and Development Standards (MELDS). The 2015 version of the Maine Early Learning and Development Standards can be found at http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf

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

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

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

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if

applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with to complete implement this activity

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

☑ Birth-to-three

Provide a link:
http://www.maine.gov/earlylearning/standards/infantsandtoddlersguidelines.pdf

☑ Three-to-Five

Provide a link:
http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf

☐ Birth-to-Five

Provide a link:

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

Describe and provide a link:

☐ Other.

Describe:

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

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

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

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

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

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

☑ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:

In 2015 Maine updated the Maine Early Childhood Learning Guidelines and renamed them the Maine Early Learning Development Standards and the PDN has implemented a new training program to get all providers trained on the new standards. A comprehensive and interactive training is available for all providers where they are able to practice curriculum planning and to integrate social and emotional development throughout the day. Additionally, follow-up technical assistance is available for any child care or pre-k provider who needs assistance implementing curriculum and/or learning activities that align with ELDS and Infant-Toddler Guidelines. Inclusion specialists are available to ensure that activities are inclusive of children with various needs. ELDS training is required for providers within the State's QRIS.

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

☑ Child care providers working with infants and/or toddlers have access to the

technical assistance for implementing early learning and development guidelines.

Describe:

MRTQ and PDN staff and contracted consultants are trained and have Master's level expertise in infant and toddler development. These staff and consultants provide assistance statewide to assist providers who serve infants and toddlers. This assistance takes place through online and face-to-face trainings as well as through the Communities of Practice (CoPs). CoPs meet monthly with MRTQ staff/consultants and support is available to assist providers in obtaining their Infant- Toddler Credential which is based upon Maine's Infant-Toddler Guidelines. Additionally, an annual 3-day Infant-Toddler Institute is offered and is focused on infant-toddler development and practices with an opportunity for providers to receive mini-grant monies for equipment to support infant-toddler development.

☑ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

MRTQ and PDN staff and contracted consultants are trained and have Master's level expertise in Preschool age child development. These staff and consultants provide assistance statewide to providers who serve preschool aged children in a variety of settings including public pre-k, through online and face-to-face trainings and CoPs. CoPs meet monthly with MRTQ staff/consultants and support is available to assist providers in obtaining their CDA in Center based Preschool using Council for Professional Recognition approved MRTQ curricula based upon Maine's Early Learning Guidelines and newly revised Early Learning Development Standards (2015).

☑ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

MRTQ PDN employs a Master's level, full time Youth Development Coordinator to provide professional development, technical assistance, Youth Development Credential support, and COA national accreditation for school age programs based upon current best practice and national research to meet the needs of school age staff working with Maine's children and youth. The PDN also partners with the Maine Afterschool Network to increase availability and accessibility to school age programs in Maine.

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

☑ CCDF funds.

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

CCDF quality funds are used to support the PDN which provides training and technical assistance to all providers, not just those who accept subsidy.

☑ Other funds.

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

CCDF funds were used along with DOE Pre-K Expansion Grant and private funding to support National Accreditation

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

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

☑ Yes.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide

assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

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

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

1) Supporting the training and professional development of the child care workforce (as described in Section 6)

2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)

3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

4) Improving the supply and quality of child care programs and services for infants and toddlers

5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)

6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

8) Supporting providers in the voluntary pursuit of accreditation

9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry

are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

The following are Maine's overarching goals for quality improvement:

- To further encourage participation in *Quality for ME*
- To promote accountability for *Quality for ME*
- To reduce confusion between *Quality for ME* and MRTQ-PDN
- To offer stronger incentives for providers to participate
- To effectively recognize quality programs and enable programs to engage parents seeking quality child care
- To avoid duplication, conserve resources, and advance a comprehensive, coherent early care and education system (ECE) for parents, providers, and the public
- To improve provider support for inclusion and diversity practice
- To support ongoing continuous improvement for *Quality for ME*
- To ensure communication and broader stakeholder engagement

Maine's overarching goals for quality improvement were developed as a result of a contract with the University of Maine to provide a review and recommendations in order to strengthen Maine's QRIS. The goals were developed in collaboration with Maine stakeholders, including providers and parents, through a formal advisory committee that included families, licensed child care programs, multiple state agencies, and other stakeholders; through regional focus groups throughout the state; through a data review of the current QRIS; and through parent and provider surveys administered over the web at www.childcarechoices.me and www.qualityforme.org. The review also included a review of the scientific literature, an examination of best practices from other states, and consultation with national experts at

scientific and professional conferences.

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

☑ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

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

  CCDF quality funds are used to fully support Maine's QRIS, Quality for ME.

- ☐ Other funds.

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

☑ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

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

  CCDF quality funds are used to support supply and quality of child care services for infants and toddlers.

- ☐ Other funds.

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

☐ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

- ☐ CCDF funds.

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

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state

or local funds, etc.)

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

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

CCDF quality funds are used to fully support Maine's Child Care Licensing program.

☐ Other funds.

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

☑ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

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

CCDF funds are used to evaluate and assess effectiveness of child care services within the state

☐ Other funds.

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

☑ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

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

CCDF quality funds are used to fund the Professional Development Network, Maine Roads to Quality.

☑ Other funds.

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

John T. Gorman Foundation funds are used for Maine Roads for the Quality

Accreditation Support program.

☑ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

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

CCDF quality funds are used to support the Professional Development Network, Quality for ME Revision Project and Child Care Licensing and are combined with

☑ Other funds.

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

Department of Education Pre-school Expansion Grant funds for the Early Learning and Development Standards training and implementation.

☐ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

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

☐ Other funds.

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

7.2 Quality Rating and Improvement System

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

☑ Yes, the State/Territory has a QRIS operating State/Territory-wide.

Describe how the QRIS is administered (e.g., state or locally administered such as through

CCR&Rs) and provide a link, if available

Maine's goal is to align and increase quality across all child care providers in the state. As part of the child care redesign implementation process, Maine will determine participation goals for all child care providers in the new child care system (including the Department of Education's pre-kindergarten program and TANF-funded child care providers). Maine's Quality Rating and Improvement System (QRIS), Quality for ME, is administered by the State in partnership with the Professional Development Network, Maine Roads to Quality. Information about Quality for ME can be found at http://www.maine.gov/dhhs/ocfs/ec/occhs/qualityforme.htm

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

Provide a link, if available

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

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

a) If yes, check all that apply to your QRIS.

☑ Participation is voluntary

☑ Participation is mandatory for providers serving children receiving subsidy.

If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

All providers serving children receiving subsidy must be enrolled at any level on Quality for ME or complete a Quality for ME waiver if they have been in business for less than one year.

☐ Participation is required for all providers

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

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

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

☑ Embeds licensing into the QRIS.

Describe:

Compliance with Licensing and Regulatory Standards is a requirement of all

programs at any level on QRIS. A program that is not in compliance with Licensing Health and Safety Standards is not eligible to be on Quality for ME. In order to move up to a Step 2 on Quality for ME, a program cannot have had a serious substantiated violation with Licensing in the past year. In order to move up to a Step 3 or Step 4 on Quality for ME, a program cannot have had a serious substantiated violation with Licensing in the past three years.

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

☐ Describes the safety of child care facilities

☐ Addresses the business practices of programs

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

☑ Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services.

If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

Parents of any child enrolled in programs at a Step 4 level are eligible to receive a double child care tax credit on their state income tax. Through the Professional Development Network, child care providers who are income eligible are eligible for scholarships to pursue early childhood education degrees and providers that participate in Quality for ME are eligible for assistance in paying accreditation fees. Programs who pay state taxes and have a Quality Improvement Plan may apply for a Child Care Investment Tax Credit for expenses made to improve quality. Providers who care for children receiving subsidy support are eligible for quality bumps dependent upon their level of quality on Quality for ME. For providers currently at a Step 2, the quality bump payment is 2%, for providers currently at a Step 3, the quality bump payment is 5%, for providers currently at a Step 4 the quality bump payment is 10%.

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

b) If yes, which types of settings or distinctive approaches to early childhood education

and care participate in the State's/Territory's QRIS? Check all that apply.

- [x] Licensed child care centers
- [x] Licensed family child care homes
- [ ] License-exempt providers
- [x] Early Head Start programs
- [x] Head Start programs
- [ ] State pre-kindergarten or preschool program
- [ ] Local district supported pre-kindergarten programs
- [x] Programs serving infants and toddlers
- [x] Programs serving school-age children
- [ ] Faith-based settings
- [ ] Other.

Describe:

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

Describe:

Maine will measure progress in improving the quality of child care programs and services by an integration of public pre-k into QRIS, an increase in the number of providers participating in and advancing within QRIS, and an increase in the number of providers serving children who are receiving subsidy.

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

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

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

Check all that apply and describe.

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

Describe:

☑ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

Maine's Professional Development Network, Maine Roads to Quality, facilitates and supports Child Care Provider Communities of Practice (CoPs). MRTQ connects and funds trained facilitators to work with groups of providers in the provider's local community. Area providers meet regularly to network, get support, and share information with one another. This Community of Practice is designed to be planned and driven by the interests and needs of the providers.

☑ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Maine Roads to Quality, in partnership with the Lead Agency, has worked with the Zero to Three Learning Community to develop a 3-tiered Infant-Toddler Credentialing System within the Professional Development Network to ensure that training is available for caregivers who do not have college experience, as well as for those who do. These Infant- Toddler Credentials are based on research that shows that caregivers' professional development is key to ensuring quality.

☐ Providing financial incentives (including the use of grants and contracts as discussed in

section 4) to increase the supply and quality of infant-toddler care.

Describe:

☑ Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

The MRTQ PDN offers ongoing training and technical assistance to early care and education providers that meets the needs of a variety of providers ranging from those who are new to the field, to higher-level trainings such as leadership trainings for directors. Opportunities for training and technical assistance are assessed bi-annually and evaluated to ensure that they reflect current research and knowledge of best practice. PDN technical assistance providers have access to a range of resources and materials including national best practice guidance on serving infants and toddlers. All TA is free and providers can request and receive TA on any topic.

☑ 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:

Child Development Services (CDS), Maine's early intervention agency which is authorized to administer Part C and Part B Section 619 under the IDEA, participates on the Child Care Advisory Council, the State Agency Interdepartmental Early Learning Team (SAIEL) and participated in the CCAC forums. The State Administrator holds seat on the State Interagency Coordinating Council (SICC) which advises CDS and is actively working with CDS to develop an interagency Memorandum of Understanding (MOU). The Lead Agency will include Child Development Services information in resource packets sent to participating CCSP families.

☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

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

Describe:

☑ Developing infant and toddler components within the early learning and development

guidelines.

Describe:

The Maine Infant-Toddler Guidelines offers parents of infants and toddlers, early childhood professionals, and policymakers a set of guidelines about development and early learning. The goal is to help individuals understand what to look for as a baby grows and develops. Another goal is to aid in understanding that infants' and toddlers' natural learning patterns and abilities can be nurtured in everyday activities occurring in a home or child care setting. Young children's learning comes from discoveries they make on their own under the guidance of caring adults rather than from structured lessons. Suggestions are provided for caregivers, which includes parents and early childhood professionals, for interacting with infants and toddlers, organizing the environment so it supports their learning, and responding to their individual differences. The guidelines are divided into three age ranges: younger infants (birth to 8 months), older infants (8 to 18 months) and toddlers (18 to 36 months). The Infant-Toddler Guidelines are available on the Lead Agency's website and through MRTQ.

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

Describe:

The Maine Infant-Toddler Guidelines offers parents of infants and toddlers, early childhood professionals, and policymakers a set of guidelines about development and early learning. The goal is to help individuals understand what to look for as a baby grows and develops. Another goal is to aid in understanding that infants' and toddlers' natural learning patterns and abilities can be nurtured in everyday activities occurring in a home or child care setting. Young children's learning comes from discoveries they make on their own under the guidance of caring adults rather than from structured lessons. Suggestions are provided for caregivers, which includes parents and early childhood professionals, for interacting with infants and toddlers, organizing the environment so it supports their learning, and responding to their individual differences. The guidelines are divided into three age ranges: younger infants (birth to 8 months), older infants (8 to 18 months) and toddlers (18 to 36 months). The Infant-Toddler Guidelines are available on the Lead Agency's website.

☑ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler

cognitive and physical development, or infant and toddler well-being.

Describe:

Maine is considering participating in a pilot opportunity with ZERO TO THREE as one of five selected states. The project will focus on supporting infant-toddler educators by providing resources to Maine's Professional Development Network, Maine Roads to Quality (MRTQ). MRTQ will have access to ZERO TO THREE's new Critical Competencies for Infant-Toddler Educators along with advanced access to an online competency self-assessment tool, 13 professional learning modules, technical assistance and a free, perpetual license to the Critical Competencies.

☐ Other.

Describe:

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

Describe:

Maine will measure progress in improving the quality of child care programs and services by the successful implementation of tier three of the Infant-Toddler Credential and an increase in the number of Child Care Provider Communities of Practice (CoPs) statewide.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

☐ State/Territory has a CCR&R system operating State/Territory-wide.

Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

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

Describe:

☐ State/Territory is in the development phase

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

Describe:

N/a

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?

Describe:

CCDF funds are used to fully support Child Care Licensing within the Division of Licensing and Regulatory Services (DLRS) in Maine. DLRS maintains a provider to licensor ratio of 80:1. This fosters stronger relationships between DLRS and providers as well as allows for more individualized attention and support. DLRS also conducts annual provider forums to share information and provide assistance to providers in their own communities. DLRS meets regularly with the Professional Development Network, Maine Roads to Quality, to discuss technical assistance referral processes and coordinated training and messaging. MRTQ works closely with licensing to meet ongoing provider TA needs identified.

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

Describe:

Maine will measure progress in improving the quality of child care programs and services by

an increase in the number of licensed child care providers in the state, a reduction in licensing violations and maintaining 80:1 provider to licensor ratio.

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

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

In Step 2 of Maine's Quality for ME, the program provides an opportunity to identify strengths and weaknesses with input from staff, administrators and families. A written plan for improvement based on the reflective practice is kept in the portfolio and made available for onsite review. At Step 3, the program is evaluated yearly using a self-assessment tool (e.g., Accreditation Guidelines, Head Start Standards, age appropriate environment rating scale, High Scope) and has a written improvement plan based upon findings of a comprehensive self-assessment designed to analyze all aspects of the program.

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

Describe:

Maine will measure progress in improving the quality of child care programs and services by an increase in number of child care programs who participate in QRIS, an increase in the number of child care programs who reside at Step 3 and 4 on QRIS and an increase in the number of children receiving subsidy that attend Step 3 and 4 programs.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☑ Yes, the State/Territory has supports operating State/Territory-wide.

Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

The goal of the Maine Roads to Quality accreditation support is to improve the quality of early care and education for children in Maine by increasing the number of accredited family child care providers, child care centers, part day programs, and school age programs across the state. CCDF funds are used to support infrastructure and implementation of the project while private funds were used to give providers access to mini-grants that remove barriers to accreditation. MRTQ can support programs in maintaining their accreditation through on-site technical assistance , email and phone support, onsite visits and observations, connection with providers who are accredited, cohort facilitation, funding to support accreditation fees as funding allows.

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide.

Describe:

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

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

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

Describe:

Maine will evaluate progress in improving quality of child care programs and services by an increase in the number of programs who are voluntarily requesting support in becoming accredited and the number of programs who achieve national accreditation.

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?

Please describe:

The Maine Early Learning and Development Standards have been developed by a multi-disciplinary team in order to promote smooth transitions for children and families and consistency across early childhood systems including public pre-k, Head Start, child care and Part C and B Section 619 of IDEA. Ongoing consumer education and training strategies are being developed in collaboration among early care and education providers including the expansion of the scope of use of the QRIS. The Early Learning and Development Standards can be found at http://www.maine.gov/doe/publicpreschool/documents/Maine-ELDS.pdf

Additionally, t he State Agency Interdepartmental Early Learning and Development Team (SAIEL) which serves as the administrative governance structure between the Department of Education and the Department of Health and Human Services, is leading the State Longitudinal Data System (SLDS) development. The SLDS was born out of the need for coordinated data collection and analysis to inform policy and practice. SAIEL members developed research questions to be answered by the SLDS project and will examine the outcomes based on the effectiveness of various early childhood interventions. This will inform the use of high-quality programs and standards across systems.

Finally, CCDF funds were used to commission an assessment of Maine's QRIS, Quality for ME. The final assessment includes recommended changes based on national best-practice, research, implementation science and cost. The report will be used to strengthen Maine's QRIS over the next three to five years.

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

Describe:

Maine will evaluate progress in improving the quality of child care programs and services by the successful full implementation and finalized training of the Early Learning and Development Standards for providers, the analysis of DHHS and DOE data shared through the SLDS and a revision of the Quality for ME system that aligns with the assessment and

subsequent recommendations.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

N/a

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.

Describe:

Maine has not made changes to definitions for violations. Maine has made changes to increase the accountability measures in place to ensure program integrity including changes to the database used by the Child Care Subsidy Program to relieve some administrative burden for program integrity activities and eliminate the likelihood of program error. These changes include automation of the 12 month eligibility period along with award letters in the database allowing for consistency and the ability to pull reports for monitoring and program management. Maine will implement an electronic provider billing system. This system allows providers to enter their billing information into the online system. The bills are then reviewed for approval by staff and sent directly to be processed for payment. This advanced system will eliminate many opportunities for administrative error. Finally, a standard file format will be implemented among all CCSP staff which will promote consistency and ease of access for file and program audits. As each new component is implemented, staff are trained, the new procedure is added to a comprehensive business flow manual and managers monitor compliance using monthly management reports. As part of the child care redesign implementation process, Maine will move payment and accountability administration to the Office for Family Independence when the operation of the Child Care Subsidy Program moves to OFI. The shift intends to increase provider accountability and program integrity for the state.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.

- ☑ Issue policy change notices
- ☑ Issue new policy manual
- ☑ Staff training
  - ☑ Orientations
  - ☑ Onsite training

☐ Online training

☑ Regular check-ins to monitor implementation of the new policies.

Describe:

Currently, all Child Care Subsidy Program staff are located in a central location. This centralization allows for regular staff meetings, in-person check-ins, electronic reminders and rolling discussions that will be used to ensure staff are consistently implementing new policies and procedures.

☐ Other.

Describe:

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.

The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93).Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors").The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Describe:

The Lead Agency has two sub-recipients of CCDF funds; Professional Development Network and Market Rate Survey contractors. Child Care Licensing is a Division within the Lead Agency. The Professional Development Network and Market Rate Survey contractors are

monitored through written contracts. Management of these contacts includes regular written reports that outline progress toward performance outcome measures, an itemized budget, written provider responsibilities and requirements. Close review of contract requirements also takes place at routine in-person status report meetings between the Lead Agency and the subrecipients.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

- [ ] Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- [ ] Run system reports that flag errors (include types)

  Describe:

- [x] Review of enrollment documents, attendance or billing records
- [x] Conduct supervisory staff reviews or quality assurance reviews
- [x] Audit provider records
- [x] Train staff on policy and/or audits
- [x] Other.

  Describe:

  As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.
- [ ] None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

- [ ] Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- [ ] Run system reports that flag errors (include types)

  Describe:

- [x] Review of enrollment documents, attendance or billing records
- [x] Conduct supervisory staff reviews or quality assurance reviews
- [x] Audit provider records
- [x] Train staff on policy and/or audits
- [x] Other.

  Describe:

  As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory?

The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

- [x] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount: Ten dollars
- [x] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [ ] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [ ] Establish a unit to investigate and collect improper payments.

  Describe:
- [x] Other.

  Describe:

  As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.
- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- [x] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount: Ten dollars
- [x] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

☑ Other.

Describe:

As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines:

c) Check which activities the Lead Agency will use for administrative error?

☑ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: Ten dollars

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

☑ Other.

Describe:

As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

☑ Disqualify client.

If checked, please describe, including a description of the appeal process for clients who are disqualified:

A disqualification penalty of up to one year will be imposed if the parent is found to have committed a program violation in connection with the program. Parents must request an Administrative Hearing in writing within ten calendar days of the parent's receipt of notice of program violation.

☑ Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

Where the Department makes a preliminary determination that a parent or child care provider may have committed a program violation, the case may be referred to the DHHS Fraud Investigation Unit pursuant to Title 22 M.R.S. §13 and the Department may pursue establishment of a program violation against the parent and/or child care provider administratively. A final determination that a program violation was made shall be made only as the result of a decision made by an Administrative Hearing, a court, or waiver of the Administrative Hearing by the parent and/or child care provider. Failure to request an Administrative Hearing constitutes a waiver. Child care providers who previously had agreements with the Department and who were found to be engaged in fraud or a program violation in connection with the Child Care Subsidy program or have been sanctioned are not eligible to receive payments on behalf of parents receiving Subsidy.

☐ Prosecute criminally

☑ Other.

Describe:

As part of the new child care system program integrity measures will be aligned between programs to ensure the highest accountability and consistent policies.