



CHILD CARE AND DEVELOPMENT FUND PLAN
FOR MAINE
FFY 2008-2009

This Plan describes the CCDF program to be conducted by the State for the period 10/1/07 – 9/30/09. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 165 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires 06/30/2009)

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PART 1
ADMINISTRATION

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

1.1 Lead Agency Information (as designated by State chief executive officer)

Name of Lead Agency: Maine Department of Health and Human Services
Address of Lead Agency: State House Station #11, 221 State Street, Augusta, ME 04333
Name and Title of the Lead Agency's Chief Executive Officer: Brenda Harvey
Phone Number: 207-287-4223
Fax Number: 207-287-3005
E-Mail Address: Brenda.harvey@maine.gov
Web Address for Lead Agency (if any): www.maine.gov/dhhs

1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State Child Care Contact (CCDF): Carolyn Drugge
Title of State Child Care Contact: State Child Care Administrator
Address: State House Station #11, Marquardt Building, Augusta ME 04333
Phone Number: 207-287-5014
Fax Number: 207-287-5031
E-Mail Address: Carolyn.drugge@maine.gov
Phone Number for child care subsidy program information (for the public) (if any):
Web Address for child care subsidy program information (for the public) (if any):
www.maine.gov/dhhs/occhs/

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2007 through September 30, 2008. (§98.13(a))

CCDF: \$15,656,315
Federal TANF Transfer to CCDF: \$
Direct Federal TANF Spending on Child Care: \$17,500,000
State CCDF Maintenance of Effort Funds: \$1,749,818
State Matching Funds: \$3,466,156
Total Funds Available: \$36,622,471

1.4 Estimated Administration Cost

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): \$956,123 (5 %). (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

Does the Lead Agency directly administer and implement all services, programs and activities funded under the CCDF Act, including those described in Part 5.1 – Activities & Services to Improve the Quality and Availability of Child Care, Quality Earmarks and Set-Aside?

- Yes.
- No. If no, use the table below to **identify** the name and type of agency that delivers services and activities. (If the Lead Agency performs the task, mark “n/a” in the box under “Agency.” If more than one agency performs the task, identify all agencies in the box under “Agency,” and **indicate** in the box to the right whether each is a non-government entity.)

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)	
Determines individual eligibility:			
a) TANF families	n/a	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b) Non-TANF families	Non-governmental community agency	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Assists parents in locating care	Child Care Resource & Referral Service	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Makes the provider payment	Non-governmental community agency	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Quality activities	Other – University; Child Care Resource & Referral Service	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Other:		<input type="checkbox"/> Yes	<input type="checkbox"/> No

If the Lead Agency uses outside agencies to deliver services and activities, **describe** how the Lead Agency maintains overall control.

The Department of Health and Human Services contracts with community-based, organizations to provide child care services, administer the state voucher program, provide resource and referral services, coordinate child care provider training activities, or otherwise support the quality of child care in the state. Contracts and awards to these agencies are governed by the policies as promulgated in the Department of Human Services’ Purchase of Services Policy Manual. This manual includes provisions on financial and administrative management, service

policies, and income eligibility determination. Furthermore, as required by state law, contract agencies meet certain performance indicators.

Agreement administrators monitor all contracts for financial compliance. This monitoring includes quarterly reporting. An annual site visit to review financial records and client records, if applicable, is completed. Program staff will monitor for specific performance requirements including the performance indicators as outlined in the contracts or agreements.

All services are scheduled for renewal through a competitive bid process every seven years. A calendar is developed noting the dates a request for proposal (RFP) will be available for specific programs. In addition, any new funds are awarded on a competitive basis as required by state law.

The State Child Care Administrator and other staff meet periodically with grantees, various associations, councils, and advisory groups to evaluate the delivery of services. The Administrator and staff will solicit recommendations from these groups on how to improve services and implement modifications and/or improvements as deemed necessary.

Eligibility for non-TANF families is determined by the 11 Voucher Management Agencies around the state and the 42 contracted child care agencies around the state. These agencies are non-governmental community agencies and/or child care providers. On April 1, 2008, eligibility determination for CCDF vouchers will be moved into the Department of Health and Human Services. This move will create a more coordinated child care system with CCDF and TANF child care programs.

The State and Regional TANF Offices, which are part of the Maine Department of Health and Human Services, determine eligibility of TANF families.

Resource and referral services are provided through contract with the 8 Child Care Resource and Referral Service agencies (Maine Resource Development Centers). These agencies are selected through a Request for Proposal process.

The Department of Health and Human Services provides direct payments to providers for clients receiving TANF as well as to the 42 contracted agencies providing direct child care services. The Voucher Management Agencies make payments to providers as outlined in the **Purchase of Social Services Policy Manual, Section V, Sub-Section I.**

1.6 Use of Private Donated Funds

Will the Lead Agency use private funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

- Yes. If yes, are those funds:
- Donated directly to the State?
 - Donated to a separate entity designated to receive private donated funds?
Name:
Address:
Contact:
Type:
- No.

1.7 Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

1.7.1 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

- Yes, and:
- () The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).
 - (__ %) Estimated percentage of the MOE requirement that will be met with pre-K expenditures.(Not to exceed 20%.)
- If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):
- No.

1.7.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))

- Yes, and

(__%) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 20%.)

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

No.

1.7.3 If the State answered yes to 1.7.1 or 1.7.2, the following **describes** State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

1.8 Improper Payments

1.8.1 How does the Lead Agency define improper payments?

The Improper Payment Information Act (IPIA) of 2002 definition is used: “any payment that should not have been made or that was made in an incorrect amount under statutory contractual administrative or other legally applicable requirement. Incorrect amounts are overpayments and under payments (including inappropriate denials of payments or service).

1.8.2 Has your State implemented strategies to prevent, measure, identify, reduce and/or collect improper payments? (§98.60(i), §98.65, §98.67)

Yes, and these strategies are:

Financial forms for settling out contracts are included in the contract package. Agreement administrators review reports and final payments are adjusted to pay only for services delivered. A web-based reporting system tracks the service provided.

The child care subsidy software that collects case level information on clients. also computes the parent fee. The software has been transferred to a web-based system for both contracted “slots” programs and vouchers. Reports that identify errors will be built into the new software as well as “red flags” to point out possible inconsistencies in the data that may indicate improper payments.

A formal site review process has been developed. All reviewers are trained for consistency of reviewing. The sampling method developed provides a calculation of error rate at the 95% confidence level. A data base was developed for reviewers to enter data from all files reviewed. Total errors were analyzed and sorted into three categories: (1) Eligibility errors, (2) Administrative Errors, and (3) Client Errors. Agencies were informed of errors found and required to make

appropriate corrections. Information about types of errors was shared with all agencies. A record of the types of errors made during eligibility determination will be analyzed to determine the policies and procedures that need clarification and where further training is needed.

A system is in place to track all audit findings and the investigations of these findings. A system to identify the total amount of improper payments for the program will be developed this year. The source of the improper payment, the proportion of improper payments from regulated vs. unregulated providers, and proportion of payments that are overpayments and the proportion that are underpayments will be tracked.

A review of existing child care subsidy policies and their definitions is in process and will be completed during the next year. Payment procedures will also be reviewed including the possibility of moving to an electronic transfer system.

Transfer of the voucher management system into a centralized system using a large eligibility determination data base with the capacity to cross-check income through a data warehouse is in process. The plan is to transfer the voucher management system from 11 non-governmental agencies into the state system that also manages TANF child care, TANF, food stamps, and other services by April 1, 2008. This system will have the capacity to cross-check with Department of Labor, Social Security, Maine Revenue, Child Support and other large data bases in order to flag possible errors. Payments to providers will be made from the state system rather than through contracts with the voucher management agencies.

- No. If no, are there plans underway to determine and implement such strategies?
- Yes, and these planned strategies are:
- No.

PART 2
DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). **Indicate** the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

Coordination involves the coordination of child care and early childhood development service delivery, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children’s emotional and mental health), (3) employment services / workforce development, (4) public education, (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

	Consultation in Development of the Plan	Coordination with Service Delivery
Other Federal, State, local, Tribal (if applicable), and private agencies providing child care and early childhood development services.	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
Public health	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
Employment services / workforce development	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
Public education	<input type="checkbox"/>	<input checked="" type="checkbox"/> *
TANF	<input type="checkbox"/>	<input checked="" type="checkbox"/> *

MAINE STATE PLAN FOR CCDF SERVICES
FOR THE PERIOD 10/1/07 – 9/30/09

	Consultation in Development of the Plan	Coordination with Service Delivery
Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Representatives of local government	<input checked="" type="checkbox"/> *	<input type="checkbox"/>
State/Tribal agency (agencies) responsible for	<input type="checkbox"/>	<input type="checkbox"/>
State pre-kindergarten programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Head Start programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Programs that promote inclusion for children with special needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Emergency preparedness ^o	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (See guidance):	<input type="checkbox"/>	<input type="checkbox"/>

* *Required.*

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation.
^o If you have prepared an emergency preparedness plan related to your child care and early childhood development services, attach it as **Attachment 2.1.1.**

Also see www.maine.gov/dhhs/occhs/publications
YIKES – Your Inventory for Keeping Everyone Safe

Consultation

- **Local government** – Each quarter a different group of towns and cities in Maine prepares a comprehensive plan. The Maine State Planning Office provides data to these communities as they develop their local comprehensive plans. The State Child Care Administrator’s Office provides data on supply and demand for child care to the Maine State Planning Office. This information is included in the CD of information that is prepared for the communities working on their plan. Supply and demand information helps communities see child care as an important part of their infrastructure. The information is also the catalyst for discussion on the need for more licensed care in Maine.
- The Maine Municipal Association featured a link to the draft State Plan for CCDF Services on their web site.
- A copy of the draft State Plan was sent to **tribal child care programs**. Two tribal child care programs are funded with Maine state CCDF funds. The Tribal

child care programs also use the market rate developed by the Lead Agency based on the market rate survey done every two years.

- The Maine Child Care Advisory Council provides input at their monthly meetings. The Maine Child Care Advisory Council is a legislatively created council whose members include representatives of: the Office of Integrated Access and Support, Children’s Behavioral Health Services, the State Child Care Administrator and State Head Start Collaboration Director and child care licensing of the Department of Health and Human Services; and one representative of the Department of Education. There is one member of the Maine Senate and two from the House of Representatives. Additional members include: two parent representatives; representatives from the Maine Child Care Directors’ Association, Maine Family Child Care Association, Maine Resource Development Centers, Maine Head Start Directors Association, and the Maine Afterschool Alliance. There is also representative from the Early Care and Education Career Development Program, the Center for Community Inclusion and a local early intervention program. The Child Care Advisory Council served in an advisory capacity on the use of quality funds.
- The State Child Care Administrator has developed a plan with the Maine State Planning Office to include questions and data on early care and education supply and demand in the notebooks given to each **local government** that is in the process of developing a comprehensive plan. This will insure that towns consider early care and education as part of the infrastructure needed for economic development.

Coordination

Public Health

- Efforts are underway to coordinate with Public Health on the development of system of Child Care Health Consultants.
- The Office of Child Care and Head Start was the recipient of the Healthy Child Care America grant when the grants were available. The Office continues to coordinate with a New England group that originated with the Healthy Child Care America funding to provide training for child care health consultants on a regional basis. Training will be offered in all New England states in the fall in collaboration with the State Early Childhood Comprehensive Systems Grant.
- The Immunization Division in the Bureau of Health provides technical assistance as licensing rules are developed and provides print materials to child care resource and referral agencies to distribute to parents.

- The Bureau of Medical Services provides information about the Maine *Dirigo* Health programs to child care providers through presentations at the Child Care Health and Safety Conference and through articles in the Child Care and Head Start newsletter, *Together*.
- The Maine Emergency Management Agency and the Bureau of Health provided technical assistance in the development of the Emergency Management Guide – Y.I.K.E.S. – *Your Inventory for Keeping Everyone Safe* developed and distributed by the Office of Child Care and Head Start. The guide is also available at <http://www.maine.gov/dhhs/occhs/publications>
Attachment 2.1.1.

Public Education

- The State Child Care Administrator coordinated with the Department of Education on the following activities: (a) Revision of the Early Childhood Learning Guidelines (b) Development of Pre-K program standards (c) Development of a credential for teachers of children Birth to Five and (d) Development of a Collaborative Funding Guide
- Coordination with the early intervention program, Child Development Services is done through work on provider credentials and training. A state child care staff serves on the federally mandated Maine Council for the Education of Children with Disabilities which has been reviewing the collaboration between early intervention and early care and education.

Programs that promote inclusion for children with special needs

- The State Child Care Program has a cooperative agreement with the Center for Community Inclusion at the University of Maine to provide technical assistance and flexible funding to providers caring for children with special needs. Four specialists are available by phone, email or to visit child care programs to assess the needs and provide information that meets the needs of the situation. Funds are available on a limited basis to pay for additional staff or equipment to enable a child with special needs to remain in child care. This project is also coordinated with both special education at the Department of Education and children's behavioral health services at the Department of Health and Human Services. Plans for a system of child care behavioral health consultants are being developed.

TANF

- The CCDF Child Care program and TANF/ASPIRE child care programs are within the Department of Health and Human Services. The ASPIRE program uses the same data collection fields and the same child care subsidy rules found in the Department of Health and Human Services' Purchase of Services Policy Manual. Plans are in process to move the CCDF voucher management from 11 non-governmental agencies into the same data base that used by the state

administrated ASPIRE child care program. Income verification will be streamlined for parents.

Child and Adult Care Food Program

- Coordination with the Child and Adult Care Food Program resulted in the development of a program that makes the CACFP available to legal unlicensed or family, friend and neighbor care providers. The CACFP is now administered in the same Division as the CCDF funding.

Head Start Programs

- Maine has a comprehensive system of Head Start and child care collaboration. Full-day, full-year Head Start programs that meet the needs of working parents are available in most counties. The State Child Care Administrator also serves as the State Head Start Collaboration Director. Training systems are designed to meet the needs of both child care providers and Head Start staff. In addition to state funding for Head Start, Maine also funds Head Start programs through the Fund for Healthy Maine (tobacco settlement funds) to provide full-day, full-year early care and education.

Youth development programs

- The AfterSchool Network supported by the Office of Child Care and Head Start provides an opportunity for the many after school programs in the state, including the 21st Century Community Learning Centers, to meet and coordinate activities. The Network is working on a collaborative plan for improving the quality of these programs including training and assessment.

Parents and providers

- Focus groups with parents and providers were held around the state by the Child Care Research Partnership to gather feedback on the development of the Quality Rating System indicators
- An on-line survey was used collect feedback on the newly developed Quality Rating System indicators.

2.1.2 State Plan for Early Childhood Program Coordination. *Good Start, Grow Smart* encourages States to develop a plan for coordination across early childhood programs. **Indicate** which of the following best describes the current status of the State's efforts in this area. **Note: Check only ONE.**

- Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- Developing.** A plan is being drafted.
The draft is included as **Attachment 2.1.2.**

- Developed.** A plan has been written but has not yet been implemented. The plan is included as **Attachment 2.1.2.**
- Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as **Attachment 2.1.2.**
- Other (describe):**

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2006-2007 State Plan.

A number of initiatives have moved coordination across early childhood programs since 2006. These include:

- Birth to Five teaching credential has been approved by State Board of Education and is moving through the legislative process with an expected implementation in October 2007.
- Pre-K standards and guidelines for approval of new public school pre-K programs have been developed by an inter-agency task force. Community collaboration between Head Start and pre-K and child care and pre-K programs is expanding.
- State Early Childhood Comprehensive Systems Grant created an Early Childhood Task Force which developed an *Invest in ME* plan.
- Head Start Collaboration Grant is supporting a Task Force to look at blending funding across Head Start, child care and pre-K programs. A guide has been developed and is available at www.maine.gov/dhhs/occhs/publications
- Public schools, child care programs and Head Start agencies will be trained in the use of this guide to increase coordination between programs.
- Training is offered across child care, Head Start, early intervention and pre-K programs. Discussion on the process for including home visitors and pre-K personnel on the Early Care and Education Registry has begun.
- Early Childhood Learning Guidelines are the recommended guidelines for public school pre-K programs and the Quality Rating System includes indicators that require the implementation of the Learning Guidelines.
- The re-organization of the Maine Department of Health and Human Services by combining the Departments of Human Services and Behavioral and Developmental Services has resulted in an Office of Child and Family Services. This Office includes Child Welfare, Children's Behavioral Health and the new Early Childhood Division. This division includes child care, Head Start, home visiting, the State Early Childhood Comprehensive Systems Grant and the Child and Adult Care Food Program. This re-organization has resulted in increased coordination across divisions within the Office of Child and Family Services.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The three entities responsible for coordination are the Children’s Cabinet, the Child Care Advisory Council and the Early Childhood Task Force. Four programs where coordination is happening are child care (CCDF and TANF), Head Start, early intervention, and public school pre-K in the following activities:

- Early Childhood Learning Guidelines
- Training for professionals
- Collaborative Head Start and pre-K programs in some communities
- Collaborative Pre-K and child care program in two communities
- Collaboration between child care, early intervention and Head Start to serve children with special needs
- Beginning collaboration with Children’s Behavioral Health on creating a system of child care behavioral health consultants
- Full-day, full-year Head Start programs supported by child care funding

Describe the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

Expected results of coordination:

- Continued implementation of the early learning guidelines across programs
- Expanded availability of training on the use of the early learning guidelines
- Implementation of specific training on literacy and numeracy funded collaboratively by the Department of Education and the Department of Health and Human Services and private funding.
- Increased awareness of quality of early care and education
- Improved instruction based on the training on the use of the early learning guidelines
- Development of a system of child care behavioral health consultants
- Reduced expulsion of children with special needs from child care programs
- Improved learning outcomes for children

Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

The Early Childhood Task Force developed the State Comprehensive Systems Grant plan - *Invest in ME*. The plan was developed with input gathered from all parts of the early childhood system including Early Care and Education. The goal of the plan to increase and support continued coordination among all early childhood programs.

The Head Start Collaboration Office developed the *Funding Collaboration Guide for Early Care and Education Partnerships in Maine*. This was developed by an Interagency Task Force. This guide will increase community-based pre-K programs that utilize braided funding and meet the needs of parents.

2.2 Public Hearing Process

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

Date(s) of statewide notice of public hearing: May 15, 2007

Manner of notifying the public about the statewide hearing:

A notice of the two public hearings was published in two daily newspapers – Bangor Daily News, and Portland Press Herald; and on the Office of Child Care and Head Start web site <http://www.maine.gov/dhhs/occhs/publications>

Date(s) of public hearing(s): June 5 and 6, 2007

Hearing site(s): The hearings were held from 7:00 to 8:30 p.m. in the following locations:

June 5 - Bangor/Brewer YWCA, 17 Second Street – Bangor

June 6 – People’s Regional Opportunity Program, 510 Cumberland Avenue,
Portland

How the content of the plan was made available to the public in advance of the public hearing(s):

Copies were mailed to the members of the Child Care Advisory Council; to contracted programs such as the Resource Development Centers. The notice of public hearings included a number to call to receive a copy of the draft state plan. The Plan was also available on the Maine Department of Health and Human Services Web site and the Maine Municipal Association web site with opportunity to comment electronically, in writing or by phone.

The Child Care Advisory Council provided comments on the Plan on May 4, 2007 and June 1, 2007. A copy of the document was distributed before the June 1, 2007 meeting.

A brief summary of the public comments from this process is included as **Attachment 2.2**. Copy of newspaper notice of public hearing is included as **Attachment 2.2a**.

2.3 Public-Private Partnerships

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

- Yes. If yes, **describe** these activities or planned activities, including the results or expected results.
- No.

1. Activities

- The Maine Small Business Development Centers provide business counseling to prospective or current child care providers on developing a business plan and finding funding.
- The State Child Care Administrator worked with a sub-committee of the Early Childhood Task Force to develop a presentation to increase public awareness of the importance of Investing in Early Care and Education. Attorney General Steve Rowe is presenting the information to Chamber of Commerce and Rotary Groups around the state.
- The Resource Development Centers meet with businesses in their area to inform businesses of the importance of employee benefits that include child care and to provide information on tax credits.
- Local television stations aired a public service announcement on infant-toddler care developed as result of Maine's inclusion in the National Infant and Toddler Initiative to increase public awareness of the need for quality infant and toddler care.
- The Maine Humanities Council, in partnership with the Office of Child Care and Head Start and RSVP (Retired Seniors Volunteers Program), offers a literacy initiative called the Born to Read Program. This program provides books and trained readers to child care providers around the state.

2. Results

- Public-private partnerships increase awareness of the importance of quality early care and education.
- Public-private partnerships increase funding available for child care quality initiatives. As quality is improved, the outcomes for children improve.

PART 3
CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

3.1.1 Certificate Payment System

Describe the overall child care certificate process, including, at a minimum:

- (1) a description of the form of the certificate (98.16(k));
- (2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and
- (3) if the Lead Agency is also providing child care services through grants and contracts, estimate the proportion of \$98.50 services available through certificates versus grants/contracts, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

1. Maine provides child care subsidy vouchers through a system of 11 Voucher Management Agencies. Vouchers are approved payments to caregivers on behalf of parents of children attending child care. A voucher can be used to pay for child care services from:
 - a. licensed child care centers;
 - b. certified family child care homes;
 - c. in-home caregivers;
 - d. legal, unlicensed family friend and neighbor caregivers;
 - e. non-residential recreational programs for children 6-12, inclusive, years of age that are operated by community-based program that meets staff-to-child ratios and perform criminal history, motor vehicle, and child abuse/neglect background checks as required of the Department regulated children's child care facilities;
 - f. child care provided by a relative; and
 - g. sectarian child care which is licensed as a children's child care facility or a certified child care home.

The parent selects the caregiver. The VMA executes a three-party agreement that sets forth payment terms and other responsibilities of the Voucher Management Agency, the caregiver and the parent. The parent is assessed a fee based on a sliding fee scale set by the Department. The fee scale is adjusted for family size and family income. The assessed fee is paid directly to the caregiver by the parent.

The Voucher Management Agency pays the balance of the caregiver's rate (up to assessed market rate or private fee, whichever is lower) directly to the caregiver, or to the parent and the caregiver for unregulated care. This is known as the voucher payment.

2. A parent who has been approved for a voucher can select a provider (types listed above in #1). The voucher management agency certifies that the selected provider meets the requirements and issues the three-party agreement noted above. Maine provides child care subsidies through voucher and contracted child care slots.
3. The estimated proportion of funding for FY08:
Contracts - 55%
Vouchers - 45%

Attach a copy of your eligibility worker's manual, policy handbook, or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1**. If these materials are available on the web, the State may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

Note: Eligibility worker's manuals, policy handbooks, or other printed guidelines for administering a child care subsidy program will be used for reference purposes only. Documents provided by Lead Agencies pursuant to this section will not be uniformly or comprehensively reviewed and will not be considered part of the Plan. All information required to be part of the Plan must continue to be set forth in the Plan.

- 3.1.2 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

- Yes, and the following **describes** the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

The Department of Health and Human Services contracts with **42** agencies statewide to provide direct child care services. The agencies provide child care services to eligible families. Services include full-time or part-time center-based child care, full-day, full-year services around Head Start, and family child care networks for children ages 6 weeks to 12 years of age. Language will be included in the contracted slots contracts that all contracted child care agencies are required to inform parents applying for child care subsidy of the option of applying for a voucher. There are waitlists for vouchers in all parts of the state.

- No.

3.1.3 The Lead Agency must allow for in-home care but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

- Yes, and the limits and the reasons for those limits are: (§§98.16(g)(2), 98.30(e)(1)(iv))

The providers must be a minimum of 16 years old and pass a state criminal check, a child protective check and a motor vehicle check (if the provider is a minor, the state criminal record check and child protective check are done on the provider's parents). The provider may be a relative but not a member of the voucher client's *family* as defined in Section VI.3 of the Purchase of Service Policy Manual. The cost of in-home care cannot exceed the approved market rate for family child caregivers without authorization of the Department of Health and Human Services.

When the parent selects an in-home caregiver, the Voucher Management Agency shall inform the parent that the caregiver is classified as a domestic service worker under the Fair Labor Standards Act (FLSA) (29 U.S.C> Section 206 (a) and, as such, is covered under minimum wage and subject to withholding tax and other requirements of the FLSA. The parent, as the employer of the in-home caregiver, is responsible for compliance with the requirements of the FLDA. Purchase of Service Policy Manual Section V, I, 4.14.

- No.

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

- Yes.
- No, and the following are the localities (political subdivisions) and the services that are not offered:

3.2 Payment Rates for the Provision of Child Care

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

These rates are provided as **Attachment 3.2A**.

The attached payment rates were or will be effective as of ___October 1, 2006___.
Revision of school age rates and Family, Friend and Neighbor Care – October 1, 2007

Provide a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- The month and year when the local market rate survey(s) was completed:
___March, 2006___ . (§98.43(b)(2))

The Lead Agency contracted with Digital Research of Kennebunk to complete a statewide market rate survey of all licensed child care providers.

- A copy of the **Market Rate Survey instrument** and a **summary of the results** of the survey are provided as **Attachment 3.2B**. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings (**See Guidance for additional information.**)
- Does the Lead Agency use its **current** Market Rate Survey (a survey completed within the allowable time period –10/1/05 -9/30/07) to set payment rates?

Yes.

No.

At what percentile of the current Market Rate Survey is the State rate ceiling set? If you do not use your current Market Rate Survey to set your rate ceilings or your percentile varies across categories of care (e.g., type of setting, region, age of children), describe and provide the range of variation in relation to your current survey. (**See Guidance for additional information.**)

75th percentile

Maine sets the maximum allowable payment at the 75th percentile of the 2006 market rate survey. Rates were adjusted to insure that infant and toddler care were paid at a higher rate than preschool care to adjust for the lower staff:child ratio. Rates are collected and set by county to adjust for the wide variations in cost of living and incomes across the state.

Rates are currently set for unregulated providers at 90% of the family child care rates. On October 1, 2007 the rate for unregulated providers will be reduced to 70% of the family child care rates as a cost reduction effort.

- How the payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey (i.e.,

describe the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b)). The attached payment rates are set at or close to the 75th percentile of the most recent market rate survey of all licensed providers in Maine. Rates for unregulated providers are set at 90% of the family child care rates because of the difficulties surveying unregulated providers. As a cost-savings the rate for unregulated providers will be set at 70% of the family child care rates on October 1, 2007. Unregulated providers are not currently required to be licensed and/or attend required training each year.

- Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

Yes. If, yes, **describe**.

Rates for children served in non-traditional hours will be calculated by applying an adjustment factor of 1.35 to the hours of care provided after 6 pm and before 6 am Monday through Friday and anytime on Saturday and Sunday.

No.

- Does the State have a tiered reimbursement system (higher rates for child care centers and family child care homes that achieve one or more levels of quality beyond basic licensing requirements)?

Yes. If yes, **describe**: Maine has a tiered reimbursement system. Child care programs that have been awarded a “Quality Certificate” by the Office of Child Care and Head Start receive a 10% quality stipend. Programs that have made substantial progress toward accreditation (waiting for a visit) may receive a 5% quality stipend for one year. On October 1, 2007 a voluntary Quality Rating System with four levels of quality will be implemented. Providers who meet all the requirements for the Level 4 on the Quality Rating System will receive the 10% quality stipend for child care subsidy.

No.

3.3 Eligibility Criteria for Child Care

3.3.1 Age Eligibility

Does the Lead Agency allow CCDF-funded child care for children above age 13 but below age 19 who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

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Yes, and the upper age is 19.

No.

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

Yes, and the upper age is ____.

No.

3.3.2 Income Eligibility

Complete columns (a) and (b) in the matrix below. Complete Columns (c) and (d) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the SMI.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	IF APPLICABLE	
			Income Level, lower than 85% SMI, if used to limit eligibility	
			(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	\$2808.26	\$2387.03	\$2106.20	75%
2	\$3,672.34	\$3,121.49	\$2,754.26	75%
3	\$4,536.42	\$3,855.96	\$3,402.32	75%
4	\$5,400.50	\$4,590.43	\$4,050.38	75%
5	\$6,264.58	\$5,324.89	\$4,698.44	75%

If the Lead Agency does not use the SMI from the most current year, **indicate** the year used:

If applicable, indicate the date on which the eligibility limits detailed in column (c) became or will become effective: October 1, 2007. Families entering the subsidy system will have incomes at or below 75% of State Median Income. Once families are in the system they will receive subsidy (as funds allow) if they are working or in school and their income does not exceed 85% of the State Median Income. Entrance Eligibility Threshold– 75% of SMI; Exit Eligibility Threshold – 85% of SMI

How does the Lead Agency define “income” for the purposes of eligibility?
Describe and/or include information as **Attachment 3.3.2.** (§§98.16(g)(5),
98.20(b))

Please see Attachment **3.3.2**, Section VI, A – Income Eligibility

Is any income deducted or excluded from total family income (for instance, work
or medical expenses; child support paid to, or received from, other households;
Supplemental Security Income (SSI) payments)?

Yes. If yes, **describe** what type of income is deducted or excluded from
total family income.

The following income is deducted or excluded from total family income:

- Child Support paid out to an individual who is not a member of your current household.
- Recurring expenses for medical care or prescribed adaptive equipment for special needs children shall be subtracted from gross family income.
- Energy Assistance Program Payments
- VISTA payments
- Women, Infants and Children Program (WIC) vouchers
- Federal Earned Income Tax Credits (EITC)
- Excluded educational assistance authorized under Title IV of the Higher Education Act
- Value of USDA Food Stamps and/or Donated Commodities
- Earned income of a student 19 years or younger who is attending an elementary or secondary school and resides with the applicant.
- When a parenting teen is the applicant, the income of the teen’s parents, step-parents, other relatives or non-relatives who provide a home for the parenting teen(s) shall be excluded. The teen parent must be attending elementary school, high school, or a GED program or they must be Department/Tribal referrals.
- Income of a court-appointed, legal guardian when services are provided to a child in their guardianship.
- See Attachment **3.3.2**, Section VI, G – Income Excluded from Family Gross Income

No.

Is the income of all family members included?

Yes.

No. If no, **describe** whose income is excluded for purposes of
eligibility determination.

- Earned income of a student 19 years or younger who is attending an elementary or secondary school and resides with the applicant.
- When a parenting teen is the applicant, the income of the teen's parents, step-parents, other relatives or non-relatives who provide a home for the parenting teen(s) shall be excluded. The teen parent must be attending elementary school, high school, or a GED program or they must be Department/Tribal referrals.
- Income of a court-appointed, legal guardian when services are provided to a child in their guardianship.

3.3.3 Eligibility Based Upon Receiving or Needing to Receive Protective Services

Does the State choose to provide child care to children in protective services, as defined in Appendix 2? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

Yes.

No.

Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

Yes.

For open child protective cases and post-child protective cases (continue services for a three-month period) referred by the Department of Health and Human Services or a federally recognized tribe, the fee and income eligibility requirements may be waived on a case by case basis.

No.

Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.

Does the State choose 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? (§§98.20(a)(3)(ii), 98.16(f)(7))

Yes. (**NOTE:** This means that for CCDF purposes the State considers these children to be in protective services.)

No.

3.3.4 Additional Eligibility Conditions

Has the Lead Agency established additional eligibility conditions?
(658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)
Children who have a court-appointed legal guardian shall be considered to be receiving protective services.
- No.

3.4 Priorities for Serving Children and Families

3.4.1 Complete the table below regarding eligibility conditions and priority rules. For columns (a) through (d), check box if reply is “Yes”. Leave blank if “No”. Complete column (e) if you check column (d).

Eligibility Category	(a) Guarantee subsidy eligibility	(b) Give priority over other CCDF-eligible families	(c) Same priority as other CCDF-eligible families	(d) Is there a time limit on guarantee or priority?	(e) How long is time limit?
Children with special needs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Children in families with very low incomes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families <u>receiving</u> Temporary Assistance for Needy Families (TANF)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families transitioning from TANF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Families at risk of becoming dependent on TANF	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

- 3.4.2 **Describe** how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs and (b) children in families with very low incomes. Terms must be defined in Appendix 2. (658E(c)(3)(B))

Maine gives priority among eligible families to:

- a) Very Low Income – family with a gross family income, adjusted to family size, that does not exceed 100% of the Federal Poverty Guidelines.
- b) Children with Special Needs – Children with a specific diagnosis/disability which, without intervention, may impede or impair the attainment of developmental milestones; and/or children who evidence a developmental delay in one or more of the following skill areas: cognitive, fine motor, gross motor, receptive and/or receptive expressive language, social/emotional or self-care; and/or children considered to be a risk for health or developmental problems as a result of established biological risk factors, and/or as a result of identified environmental risk factors. Parents will provide documentation of identification of special need from Child Development Services, or a public health agency, school, welfare, office or community social service.

- 3.4.3 **Describe** how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting to transition off TANF through work activities, and (c) those at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

The Maine Department of Human Services guarantees child care assistance to TANF families if the family meets their employment and training plan and for families that have left TANF because of increased earnings. For families currently receiving TANF benefits, child care is paid for directly from the State of Maine's TANF block grant. On October 1, 2007, TANF will begin to manage the voucher system for TANF transitional clients. This will create a more seamless system for clients and centralize eligibility for child care, Food Stamps, MaineCare and other services.

- 3.4.4 Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- Yes, and the additional priority rules are: (Terms must be defined in Appendix 2)
- No.

- 3.4.5 Does the Lead Agency serve all eligible families that apply?

Yes.

No.

3.4.6 Does the Lead Agency maintain a waiting list?

Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?

The Voucher Management Agencies shall maintain waiting lists if service is not available at the time of application or referral for service. Waiting lists shall be updated no less frequently than every six months. When voucher applicants are contacted by the Voucher Management Agency for the purpose of updating waiting lists and the applicant fails to respond within 30 days, the applicant's name may be removed from the waiting list.

The contract child care "slots" agencies also keep a waiting list using the same process as described above for voucher management agencies.

TANF transitional clients shall be served as referred and shall not be placed on a waiting list for TANF Transitional child care as long as funding is available for this target group.

Special needs and very low income families shall be given equal priority over all other clients. Among these two priority groups, clients are selected for services on a first-come, first-served basis by county;

When there are no special needs or very low income clients on the waiting list, all other client groups shall be accepted for service on a first-come, first-serve basis.

No.

3.5 Sliding Fee Scale for Child Care Services

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family. A copy of this sliding fee scale for child care services and an explanation of how it works is provided as **Attachment 3.5.1**.

The attached fee scale was or will be effective as of _October 1, 2007 _____.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- Yes, and the following **describes** any additional factors that will be used:

As shown in **Attachment 3.5.1**, the fee for a family receiving subsidized child care is determined based on the weekly gross income of a family adjusted by size of the family. In addition, if a family has more than one child in care, the fee for the 2nd child enrolled is reduced by 50 percent, the fee for the third child is reduced by 75 percent, and no additional fee is assessed for any more children.

In addition, families may not be assessed fees that exceed 10% of a family's gross income for all of their children in child care.

- No.

- 3.5.2 Is the sliding fee scale provided in the attachment in response to question 3.5.1 used in all parts of the State? (658E(c)(3)(B))

- Yes.

- No, and other scale(s) and their effective date(s) are provided as **Attachment 3.5.2**.

- 3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$__**17,170 Annual Income**__

The Lead Agency must **select ONE** of these options:

- ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
- ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The following describes these families:

On a case by case basis a Department or Tribal caseworker may waive or reduce a parent's assessed fee for Child Protective clients, post-protective clients, or children in the custody of federal recognized tribes.

- 3.5.4 Does the State allow providers to charge parents the difference between the maximum reimbursement rate and their private pay rate?

- Yes.

No. Parents can not be charged a rate higher than private fees. If a caregiver has a policy of requiring a one-time deposit, registration fee or application fee for all clients, the parent is responsible for an amount up to the assessed parent fee, and the Voucher Management Agency/Provider shall pay the difference up to the Market Rate. The deposit or fee is paid in addition to the agreed upon weekly rate.

Special activity fees are the responsibility of the parent. If the parent elects not to pay, then the caregiver shall be responsible for providing alternative child care for children who do not participate in the activity.

Transportation fees, late pickup fees and other fees of this nature shall be the responsibility of the parent.

3.5.5 The following is an explanation of how the co-payments required by the Lead Agency's sliding fee scale(s) were determined to be affordable: (§98.43(b)(3))

The fee scale recognizes the financial constraints of families with more than one child. For these families the fee is reduced for the subsequent children as described above. The fee scale also adjusts the portion a family is responsible for gradually as income increases. Finally, a family will never pay more than 10% of their gross family income regardless of the number of children.

PART 4
PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

4.1.1 **Describe** the process for a family to apply for and receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). At minimum, the description should include:

- How parents are informed of the availability of child care services and about child care options
- Where/how applications are made
- What documentation parents must provide
- How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4
- Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs
- Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

Attach a copy of your parent application for the child care subsidy program. If the application is available on the web, provide the appropriate Web site address (application must still be attached to Plan):

Information regarding potential child care subsidies is available through the child care resource and referral agencies, the Department's Regional Offices, Head Start Agencies, other community-based service organizations in the state and on the Department of Health and Human Services web site.

Applications are made available for child care services through the eleven Voucher Management Agencies state-wide and contracted child care agencies. Applicants may apply in person or through the mail. Assistance in completing the application is provided by contracted child care agencies or the state's voucher management agencies.

The contracted child care agencies and voucher management agencies determine eligibility. Eligibility determination is only completed if all supporting documentation is received within 30 days of the completed application. The documentation required includes:

Verification of **earned income** includes one or more of the following:

- Four or more current, consecutive and complete pay stubs
- Four or more current, consecutive and complete pay envelopes
- W-2 Form (if representative of current and future earnings)

- State and/or Federal Income Tax return and Schedule C
- Statement of gross earnings for the past four or more weeks, signed and dated by the employer on company letterhead
- Employer's wage records

Verification of **unearned income** includes one or more of the following:

- Benefit check
- All types of award letters
- Income tax records
- Support and alimony payments evidenced by court order, divorce or separation papers, or check copies
- Social Security Query Card Response
- Social Security District Office verification
- Bank statement
- Maine Employment Security Commission verification
- Worker's Compensation verification
- Insurance company verification

Verification of school schedule

- Verification of enrollment including school schedule

Other verification:

- Disabled adult – Doctor's or mental health professional verification
- Child Support Receipt or Attempt to Collect – Court order or Support enforcement documentation
- Child Support Paid Out – wage stub or bank statement
- Child Protective Referral or Foster Care Referral
- TANF Transitional Documentation from Office of Integrated Access and Support

If eligible, parents will enter into an agreement with the child care provider as well as sign a fee agreement.

Families must notify the agency of any changes in income once receiving a child care subsidy. The voucher management agencies and contracted child care centers also re-certify a family every six months. A family remains eligible as long as income is at or below 85% of the state median income and the parent(s) are employed or in training.

4.1.2 Is the application process different for families receiving TANF?

Yes. If yes, **describe** how the process is different:

Instead of applying to the voucher management agency or to a contracted slots program, as CCDF funded low income parents do, TANF recipients who are participating in the work, training or volunteer part of the TANF program (ASPIRE) receive child care benefits as a part of their plan through the TANF program. TANF recipients discuss their need for child care with their case worker, rather than completing a CCDF Subsidy Application Form. The caseworker approves the child care service. The parent finds a child care provider and the process for paying the provider is set up in the TANF eligibility computer system. On October 1, 2007, TANF will begin placing payment for child care on the TANF recipient's Electronic Benefits Transfer Card (EBT). TANF recipients will be responsible for paying their child care provider.

No.

- 4.1.3 The following is a detailed description of how the State ensures parental choice by making sure that parents are informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

Our *Subsidies to Eligible Parents* brochure defines for parents that they may choose from all licensed child care providers as well as legal-unlicensed providers who have passed background checks. Staff at Resource Development Centers, the voucher management agencies and at DHHS offices inform parents of their choice of providers when they apply for a voucher.

- 4.1.4 Does the State conduct activities aimed at families with limited English proficiency to promote access to child care subsidies and reduce barriers to receiving subsidies and accessing child care services?

Yes. If yes, **describe** these activities, including how the State overcomes language barriers with families and providers.

The Voucher Management Agencies and Resource Development Centers utilize "Language Line" which will connect a translator into the call when a non-English speaker calls for information about child care subsidy and/or child care referral.

The "Steps to Choosing Child Care" booklet, the brochure describing subsidies, the application for a subsidy, the parent fee agreement, the provider agreement, and the Family Child Care Licensing Rules have been translated into Arabic, French, Khmer, Somali, Spanish and Vietnamese.

No.

4.2 Records of Parental Complaints

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

The Department's Division of Licensing maintains a record of substantiated parental complaints. Any parent seeking child care may request whether a substantiated complaint has been made against a provider.

A description of parent's rights and responsibilities related to child care is available at the following address <http://www.maine.gov/dhhs/occhs/rights.htm> on the Office of Child Care and Head Start web site.

4.3 Unlimited Access to Children in Child Care Settings

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31)

As required in the state licensing rules for family child care homes and child care centers, all providers are required to allow parents unlimited access to children. In addition, parents must be able to reach all child care facilities by telephone when children are present.

4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

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

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 Child Care 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. The TANF agency that established these criteria or definitions is: _ Maine Department of Health and Human Services, Office of Integrated Access and Support.

- "appropriate child care":
Appropriate child care is child care furnished by a child care provider who has passed background checks as required by State law and regulation

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- "reasonable distance":
Reasonable distance is defined as not exceeding by ½ hour the normal commute time from the participant's dwelling to work or an approved activity.
- "unsuitability of informal child care":
Unsuitable child care is defined as a potential child care provider that has a substantiated complaint(s) involving abuse or neglect, or a background check with the State Bureau of Investigation and/or the Department of Motor Vehicles that indicates convictions that would justify the denial of the application to receive child care payments.
- "affordable child care arrangements":
Affordable child care is defined by the child care market rate that is determined every 2 years by the Office of Child Care and Head Start of the Maine Department of Health and Human Services.

PART 5
ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF
CHILD CARE

5.1 Quality Earmarks and Set-Asides

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; describes the expected results of the activities and, if the activities have been ongoing, the actual results of the activities. **For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds (not to exceed 36 months).**

Infants and toddlers: Maximum age of toddlers served by earmarks – 36 months

1. Infant Toddler Summer Institutes and Grants

For the past six summers an intensive summer institute has been available to caregivers of infants and toddlers. Caregivers in both family child care and center-based child care participated in the college course offered by the University of Maine at Farmington for three credits. The caregivers also received equipment grants of \$1,000 to enhance quality for infants and toddlers in their care. Providers who are planning to increase the number of infants and toddlers in their care are given priority for the Institute.

To date, 180 providers have participants have completed the institute for credit and received grants. This incentive has resulted in approximately 300 additional slots for infants and toddlers.

The Summer Institute will be offered in Summer 2007. An advanced level course is also planned. The Institutes will increase the knowledge of providers about infant and toddler care and will serve as an incentive to increase the number of spaces available for infant and toddler care in Maine.

2. Maine Roads to Quality Infant and Toddler Curriculum

As part of Maine Roads to Quality 180 hour Core Knowledge Training, a 30-hour curriculum on infant and toddler care has been developed and offered. This entry-level training is tailored to meet the needs of Maine caregivers in family child care and child care centers.

Each year the training is offered throughout the state by the eight Resource Development Centers. Evaluation of the training has indicated increased knowledge of infant and toddler care and application of information in practice.

3. **Technical Assistance to Early Head Start/Infant and Toddler Child Care**
Collaboration between child care and Head Start has resulted in a position aimed at providing technical assistance to Early Head Start and Infant and Toddler Child Care programs in Maine. This part-time position has provided support for Early Head Start programs, made follow-up visits to Infant/Toddler Summer Institute participants to help identify needs for advanced training and given technical assistance on-site to newly established programs providing Infant/Toddler care.
4. Maine was part of the Zero to Three National Infant Toddler Initiative. Some of the activities that the Infant- Toddler Task Force has completed:
 - a. Public Service Announcement on the importance of quality infant and toddler care is being aired on Maine television stations. A cover letter from the Governor encouraged stations to air the announcement.
 - b. Infant and Toddler learning guidelines have been drafted. A training and implementation plan will be developed this summer
 - c. A course (*Sharing Books with Babies*) on pre-literacy for providers working with infants and toddlers has been developed. Train-the-trainer courses have prepared trainers to offer the course around the state. Through a collaboration with *Raising Readers* trainers can provide child care professionals with a number of books appropriate for infants and toddlers. The Infant and Toddler Environmental Rating Scale is being used as a pre and post indicator of quality interactions.
5. Maine is part of two Zero to Three Infant and Toddler Learning Communities – Quality Rating Systems and Credentials.
6. Infant and Toddler Care Credentials are being developed with three levels of professional development for child care professionals.
7. Infant and Toddler Learning Guidelines were developed and printed. Training on the application of the guidelines in infant and toddler care is being piloted. The training will be offered around the state during the next two years.

Resource and referral services:

The Department provides funding to the eight Child Care Resource Development Centers around the state to provide child care referrals, consumer education and to build the capacity of the child care system in Maine.

All of the agencies are using the NACCRRAware software to make referrals and to track activities of the Resource Development Center.

The intended outcome is to help parents find affordable and accessible child care and to increase the availability of child care in Maine.

To fulfill the requirements of performance based contracting, the Department surveys parents who have received referral services to determine satisfaction with service and usefulness of the referrals, and to learn if parents increased their knowledge about the criteria of quality child care and the availability of child care subsidies. The Department also surveys providers to determine if the Resource Development Centers are meeting their training and technical assistance needs.

The resource and referral agencies are required to become Quality Assured through NACCRRA. A plan to meet the criteria of the Quality Assurance program is submitted to the Department annually.

School-age child care:

An AfterSchool Network has been established through a cooperative agreement with the University of Maine at Farmington. The Network will be the catalyst for expanding and improving the quality of after-school programs in Maine. The Network will provide consultation on evaluation; seek to acquire start-up funding through grant writing; and promote the expansion and continuation of after-school programs statewide. Network members will develop a training plan to improve the availability of after school program staff training. A youth development credential is being developed with three levels of professional development for youth development professionals.

The Network will serve as a vehicle for bringing together policymakers, educators, child care providers, youth development workers, program developers, advocates, parents and others interested in improving outcomes for children through after-school programs that provide both school-age care to support working families and educational after-school programs that improve academic achievement. The Network will provide a means for joint planning, sharing of resources and best practices, building bridges to and between federal, state, and local after school initiatives, and forging partnerships necessary for comprehensive statewide after school policies.

The Network is receiving grant funding to expand its work through the Mott Foundation and other sources. The Network worked with the Department of Education to apply for funding from the Chief State School Officers to support the development of “Out-of-school-time” programs.

A series of publications on Afterschool programming has been developed and will be distributed.

- 5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds) during the 1-year period: October 1, 2007 through September 30, 2008:
\$ 5,102,000 (27 %)

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5.1.3 **Check** each activity the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

Activity	Check if undertaking/will undertake	Name and type of entity providing activity	Check if this entity is a non-governmental entity?
Comprehensive consumer education	<input checked="" type="checkbox"/>	Resource Development Centers	<input checked="" type="checkbox"/>
Grants or loans to providers to assist in meeting State and local standards	<input checked="" type="checkbox"/>	University of Southern Maine	<input checked="" type="checkbox"/>
Monitoring compliance with licensing and regulatory requirements	<input checked="" type="checkbox"/>	DHHS	<input type="checkbox"/>
Professional development, including training, education, and technical assistance	<input checked="" type="checkbox"/>	University of Southern Maine and Resource Development Centers	<input checked="" type="checkbox"/>
Improving salaries and other compensation for child care providers	<input checked="" type="checkbox"/>	DHHS Quality funds to contracted slots agencies	<input type="checkbox"/>
Activities in support of early language, literacy, pre-reading, and early math concepts development	<input checked="" type="checkbox"/>	USM, RDCs, Infant and Toddler Initiative	<input checked="" type="checkbox"/>
Activities to promote inclusive child care	<input checked="" type="checkbox"/>	Center for Community Inclusion - UM	<input checked="" type="checkbox"/>
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children	<input checked="" type="checkbox"/>	Health Consultant Training	<input type="checkbox"/>
Activities that increase parental choice	<input checked="" type="checkbox"/>	Information	<input type="checkbox"/>

Other activities that improve the quality of child care (describe below).

Other activities that improve the availability of child care (describe below).

(§98.51(a)(1) and (2))

	on Choosing Child Care	
<input checked="" type="checkbox"/>		<input type="checkbox"/>
<input checked="" type="checkbox"/>		<input type="checkbox"/>

Maine is piloting a voluntary Quality Rating System with four levels of quality. The system will be implemented state wide on October 1, 2007. As part of the implementation of the Quality Rating System, a statewide Technical Assistance Network will be initiated. Child care providers will have access to professionals who can work with them using a collaborative consultation model to improve the quality of child care. The accreditation facilitation project will continue to assist providers as they move through the accreditation process.

The Resource Development Centers are charged with improving the availability of child care. Using supply and demand data, they determine where care is needed and encourage prospective providers and help them through the licensing process. The Small Business Development Centers provide consultation on the development of business plans and financing.

- 5.1.4 For each activity checked, **describe** the expected results of the activity. If you have conducted an evaluation of this activity, **describe the results**. If you have not conducted an evaluation, **describe** how you will evaluate the activities.0

Comprehensive consumer education

Comprehensive consumer education is provided through Maine’s child care resource development centers (RDCs). The eight RDCs provide written material and consultation to parents through referral staff. The RDCs also provide referral services to both private and subsidized clients. In addition, the Departments Regional Offices provide information to parents seeking child care.

The Department of Health and Human Services and the Maine Child Care Resource Development Centers (MRDC) worked together to develop a packet on consistent information on child care for parents who request referrals or information.

The packet includes:

- Fact Sheets on the following topics:
 - The Cost of Child Care
 - Double Child Care Tax Credit
 - Look for Quality Care for Infants

- What Is Quality Child Care?
- Revised Steps to Choosing Child Care booklet
- Information on health and safety from the Maine Department of Health and Human Services including information on Maine Care health insurance program

A survey to measure parent's evaluation of the consumer education provided by the Resource Development Centers and the resulting increase in parent's ability to select quality child care is distributed and collated by the Department.

Grants or loads to providers to assist in meeting State and local standards

The Department pays for lead testing to determine if programs are meeting state standards on lead paint.

Grants are available to help programs meet accreditation requirements if the program is a member of an accreditation cohort organized by the Accreditation Facilitation Project through the University of Southern Maine. An evaluation of the project measures its effectiveness in helping programs reach accreditation.

Monitoring and Compliance with licensing and regulatory requirements.

CCDF funds will be used to maintain and increase monitoring of compliance with licensing requirements. Expected results of monitoring will be a decrease in the number of licensed facilities that are out-of-compliance with licensing rules

Professional development, including training, education and technical assistance.

CCDF quality funds are used to fund the state's child care and early education career development center, Maine Roads to Quality (MRTQ). MRTQ is responsible for the development/ revision of a 180-hour core knowledge training program, maintaining registries for providers and approved trainers, administering a scholarship program, and administering an accreditation facilitation project.

In addition, CCDF funds are allocated to the child care Resource Development Centers to deliver the approved MRTQ training.

The expected results of increased training will be an improvement in the quality of child care programs. Two recent studies: *The Cost and Quality of Full-Day, Full-Year Preschool Programs in Maine* and *the Cost and Quality of Family Child Care in Maine*, both found a positive correlation between the quality of care and the training level of providers.

Maine Roads to Quality tracks all the training provided through the Resource Development Centers. The provider Registry also tracks each provider's training record. Information from the Registry is being merged into the application when a program applies to part of the Quality Rating System. The number of teachers who have reached the Quality Rating System's required levels on the Registry will be part of the determination of the program's QRS level. A system is being developed to measure changes over time as the Quality Rating System is implemented.

Improving Salaries and Compensation

The Department provides program improvement funds to the contracted child care agencies to provide quality improvements, as the agency deems necessary. In addition, the Department provides a 10% differential reimbursement to quality child care providers (described below). If a contracted child care agency receives this 10% differential, 75% of those funds must be used to increase salaries.

A quality child care provider must meet one of the following criteria:

- Current accreditation by one of the following agencies: National Association for the Education of Young Children (NAEYC), National Association of Family Child Care (NAFCC), the National After School Alliance (NAA) or the American Montessori Society.
- Meet Head Start Performance Standards for Programs of Excellence and Quality.
- Be a family child care provider with either a: Child Development Association Credential (CDA); or a Associates, Bachelor, Masters, or Ph.D in Early Childhood Education, child development, or related degree. Providers with related degrees will need at least 12 credits in Early Childhood Education. Providers with degrees will also need to complete a 3-credit course or 45 hours of Core Knowledge Training every 3 years.

The turnover rate of child care providers has been linked to compensation. Contracted child care providers are required to report their staff turnover rate to the Department. The Market Rate and Workforce Study, which is done every two years, also measures trends in child care staff turnover rates in Maine

Activities that promote inclusive child care

The Department of Health and Human Services has a cooperative agreement with the Center for Community Inclusion at the University of Maine to provide technical assistance and flexible funding to providers caring for children with special needs. Four specialists are available by phone, email or to visit child care programs to assess the needs and provide information. Funds are available on a limited basis to pay for additional staff or equipment to enable a child with special needs to remain in child care. This project is coordinated with both special education at the Department of Education and children's behavioral health services at the Department of Health and Human Services.

Data is collected on the number of children who are asked to leave child care because of behavioral issues. Data is also collected on the number and types of technical assistance provided, the types and locations of providers, the number of repeat calls from the same providers, and type of special need. The expected

outcome of the program is to improve the skills of providers to meet the needs of all the children in their care.

Other Quality Activities

The expansion of Maine's Quality Rating System to four levels with easily understood indicators is being piloted and will be implemented in Fall, 2007. The Quality Rating System has been developed by the Department of Health and Human Services with much input from providers and parents through focus groups and surveys. The program will be administered by the Department and will incorporate our current system. The pilot study will validate the effectiveness of the indicators to measure quality at different levels. Data will be collected throughout the process and over time to measure the impact of the Quality Rating System on the improvement of child care quality in Maine. The expected outcome will be better informed parents who will select quality child care when it is available.

Mental Health Consultation

A child care mental health consultation model has been developed in coordination with the Children's Behavioral Health Division at DHHS. The model will be implemented with three child care centers and one Head Start agency in one region of the state in October 2007. The results will be evaluated and the model will be adjusted and expanded to other regions of the state.

5.2 Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

5.2.1 **Status of Voluntary Early Learning Guidelines.** Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for three to five year-olds. **NOTE: Check only one box to best describe the status of your State's three-to-five-year-old guidelines.**

- Planning.** The State is planning for the development of early learning guidelines. Expected date of plan completion: _____
- Developing.** The State is in the process of developing early learning guidelines. Expected date of completion: _____
- Developed.** The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as **Attachment 5.2.1.**
- Implementing.** In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as **Attachment 5.2.1.**
- Revising.** The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as **Attachment 5.2.1.**
- Other (describe):**

Describe the progress made by the State in developing, implementing, or revising early learning guidelines since the date of submission of the 2006-2007 State Plan.

Since the submission of the 2006-2007 State Plan the following activities indicate progress in the development of the Early Learning Guidelines:

- The Early Childhood Learning Guidelines were printed and distributed.
- A state wide conference on the application of the Guidelines was held in late fall 2005. Dr. Sharon Lynn Kagan emphasized the importance of

appropriate assessment of preschoolers. This conference was a collaboration between the Maine Department of Health and Human Services and the Maine Department of Education.

- The training to implement the Learning Guidelines is being offered in all areas of the state through the Resource Development Centers
- The Department of Education supported three pilots of the training on the use of the Early Childhood Learning Guidelines. These pilots were attended by public school pre-K teachers.
- The voluntary Quality Rating System includes a requirement that a number of teachers in each classroom attend training on the use of the Early Childhood Learning Guidelines.
- A crosswalk of the Learning Guidelines to professional development training being offered by the Associates degree programs at the Community Colleges, the Bachelors degree level programs at the University, the Core Knowledge Training offered by the Early Care Development Career Development Center (Maine Roads to Quality) through the Resource Development Centers, Head Start training was completed. Early intervention training and training for pre-K teachers was evaluated to determine missing components of training and to develop a training plan to support the implementation of the Early Learning Guidelines.
- Many Public School Pre-K programs, Head Start, and child care programs are using the Early Childhood Learning Guidelines.
- Legislation is pending that will require public school pre-K programs to use the Early Childhood Learning Guidelines.

If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?

Yes. If yes, **name standards**.

The Head Start Child Outcomes are included in the Maine Early Childhood Learning Guidelines. The indicators in the Early Childhood Learning Guidelines are “cross-walked” to the K-12 Maine Learning Results to delineate how Early Learning supports learning in K-12..

No.

If developed, are the guidelines aligned with early childhood curricula?

Yes. If yes, **describe**. Creative Curriculum has “cross-walked” their curriculum with the Maine Early Childhood Learning Guidelines. Early childhood teachers are encouraged to use the Guidelines combined with classroom observations as the basis of intentional curriculum planning.

No.

Have guidelines been developed for children in the following age groups (check if guidelines have been developed):

- Birth to three. Guidelines are included as Attachment 5.2.1
 Birth to five. Guidelines are included as Attachment 5.2.1
 Five years or older. Guidelines are included as Attachment 5.2.1

Efforts to develop early learning guidelines for children that may differ from those addressed in *Good Start, Grow Smart* (i.e., children birth to three or older than five) may be described here.

The guide *Supporting Maine's Infants and Toddlers Guidelines for Learning and Development* was developed by members of the Maine Infant and Toddler Initiative. Expert reviews provided input. A Forum was held to gather feedback from infant and toddler caregivers and others on the format and content of the Guidelines.

The Guidelines have been printed. Training on the use of the Guidelines is currently being piloted. The training will be offered in all parts of the state in the fall.

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

www.maine.gov/occhs/publications

5.2.2 **Domains of Voluntary Early Learning Guidelines.** Do the guidelines for children three-to-five-years-old address language, literacy, pre-reading, and early math concepts?

- Yes.
 No.

Do the guidelines for children three-to-five-years-old address domains not specifically included in *Good Start, Grow Smart*, such as social/emotional, cognitive, physical, health, creative arts, or other domains?

- Yes. If yes, **describe**.
The domains of the Early Childhood Learning Guidelines include the following areas:
Approaches to Learning
 Initiative and Curiosity
 Persistence and Reflection
Personal and Social Development
 Self Control

- Self Concept
- Social Competence
- Creative Arts
- Early Language and Literacy
 - Communicating and Listening
 - Book Knowledge and Appreciation
 - Comprehension
 - Sounds in Spoken Language
 - Print Concepts
 - Alphabet Knowledge
 - Early Writing
- Health and Physical Education
 - Healthy Habits
 - Gross and Fine Motor Skills
- Mathematics
 - Numbers and Number Sense
 - Shape and Size
 - Mathematical Decision-Making
 - Patterns
- Science
 - Scientific Knowledge
 - Scientific Process
- Social Studies
 - Families and Communities

No.

5.2.3 **Implementation of Voluntary Early Learning Guidelines.** Indicate the strategies the State used or expects to use in **implementing** its early learning guidelines.

Check all that apply:

- Disseminating materials to practitioners and families
- Developing training curricula
- Partnering with other training entities to deliver training
- Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
- Other. Describe: Colleges with Early Care and Education courses include training on the implementation of the Early Childhood Learning Guidelines and the Infant and Toddler Development Guidelines.

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Indicate the stakeholders that are (or expect to be) actively supporting the implementation of early learning guidelines.	Indicate the programs that mandate or require the use of early learning guidelines.
<input checked="" type="checkbox"/> Publicly funded (or subsidized) child care	<input type="checkbox"/> Publicly funded (or subsidized) child care
<input checked="" type="checkbox"/> Head Start	<input type="checkbox"/> Head Start
<input checked="" type="checkbox"/> Education/Public pre-k	<input type="checkbox"/> Education/Public pre-k
<input checked="" type="checkbox"/> Early Intervention	<input type="checkbox"/> Early Intervention
<input checked="" type="checkbox"/> Child Care Resource and Referral	<input type="checkbox"/> Child Care Resource and Referral
<input checked="" type="checkbox"/> Higher Education	<input type="checkbox"/> Higher Education
<input type="checkbox"/> Parent Associations	<input type="checkbox"/> Parent Associations
<input type="checkbox"/> Other. Describe:	<input type="checkbox"/> Other. Describe:

Legislation is pending that will require Public Pre-K to use the Early Childhood Learning Guidelines.

How are (or will) cultural, linguistic and individual variations (be) acknowledged in implementation?

Professionals knowledgeable about inclusion and cultural competence were part of the development team as the Early Childhood Learning Guidelines were developed. Indicators were written with an awareness of the need to address these variations. The training on the use of the Guidelines also includes skills to implement the Guidelines with all children.

How are (or will) the diversity of child care settings (be) acknowledged in implementation?

The training on the use of the Guidelines includes guidance on implementation in family child care settings as well as center-based care and pre-K classrooms.

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address:

The Early Childhood Learning Guidelines have been cross referenced to the Core Knowledge training and to college courses in Maine. See 5.2.1. above. At all of these levels, courses are being revised to incorporate preparation for the implementation of the Early Childhood Learning Guidelines.

Articulation - The 180-hours of core knowledge training is articulated to the Community Colleges for 9 credits with the submission of an acceptable portfolio. The Community Colleges have articulation agreements with the University B.S. degree programs.

The Career Development System – Maine Roads to Quality – has a trainer registry that lists trainers who have been approved to teach the Core Knowledge Training. Master’s degree level trainers teach all of the Core Knowledge training supported by the Lead Agency.

The Core Knowledge training includes only curriculum that has been approved by the Professional Development System – Maine Roads to Quality

A data base to track practitioners’ training has been in place for six years. Data is collected at Maine Roads to Quality and is automatically transferred to the Provider Registry so providers have an accurate record of their training for licensing requirements and other uses.

Training effectiveness is evaluated by provider evaluation of the training delivered and it’s usefulness in their work. A system to evaluate the impact of training on program improvement and child outcomes is being discussed.

Work has been done on a Birth to Five teaching credential for teachers with B.S. degrees in Early Childhood. It has been presented to the State Board of Education. The Legislature will review the credential in this session. Infant-toddler and school age credentials are under discussion.

Specialized strategies to reach family, friend, and neighbor care include newsletters sent directly to all providers who receive vouchers. More work is needed in this area,

5.2.4 Assessment of Voluntary Early Learning Guidelines. As applicable, **describe** the State's plan for:

(a) Validating the content of the early learning guidelines

The Pilot Project that measured the effectiveness of the training on the use of the Early Childhood Learning Guidelines also gathered data on the appropriateness of the indicators. Revisions in the guidelines were made after collecting this input from providers who were applying the Guidelines in their classrooms.

A survey will be developed to gain feedback from the early care and education professionals who have completed the training and are now implementing the guidelines. The survey will collect information on the usefulness of the guidelines, as written.

(b) Assessing the effectiveness and/or implementation of the guidelines

The names of providers who have completed the guideline training are available as part of the Maine Roads to Quality Registry.

(c) Assessing the progress of children using measures aligned with the guidelines An Assessment Tool for Family Child Care - Early Learning Assessment – was developed through an Early Learning Opportunities Act Grant. This tool was designed to help family child care providers take a careful look at the children in their care and to document the learning, skills, and abilities of each child from age 3 through kindergarten entry. The Tool is aligned with the Maine Early Childhood Learning Guidelines.

(d) Aligning the guidelines with accountability initiatives
The Maine Quality Rating Scale is currently being piloted and will be implemented statewide in October, 2007. A number of the indicators on the levels of quality are related to implementation of the Early Childhood Learning Guidelines.

Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan):

Maine Quality Rating System
<http://www.maine.gov/dhhs/occhs/qualityforme.htm>

5.2.5 **State Plans for Professional Development. Indicate** which of the following best describes the current status of the State's efforts to develop a professional development plan for early childhood providers that includes all the primary sectors: child care, Head Start, and public education. **NOTE: Check ONLY ONE box to best describe the status of your State's professional development plan.**

- Planning. Indicate** whether steps are under way to develop a plan. If so, describe the entities involved in the planning process, time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- Developing.** A plan is being drafted. The draft or planning documents are included as **Attachment 5.2.5**.
- Developed.** A plan has been written but has not yet been implemented. The plan is included as **Attachment 5.2.5**.
- Implementing.** A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as **Attachment 5.2.5**.
- Revising.** The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 06-07 State Plan. The revisions or the revised plan are included as **Attachment 5.2.5**.

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- Other (describe):** Maine has had a professional development system in place since 2000. This system includes training, a trainer registry, a provider registry, an accreditation facilitation project and scholarship funds. The 180 hours of core knowledge training is articulated to the Community Colleges for 9 credits with the submission of an acceptable portfolio. The training is developed by Maine Roads to Quality and delivered by the Child Care Resource Development Centers statewide.

Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2006-2007 State Plan.

If your State has developed a plan for professional development, does the plan include (**Check EITHER yes or no for each item**):

	Yes	No
Specific goals or desired outcomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A link to Early Learning Guidelines	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Continuum of training and education to form a career path	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Articulation from one type of training to the next	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality assurance through approval of trainers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality assurance through approval of training content	<input checked="" type="checkbox"/>	<input type="checkbox"/>
A system to track practitioners' training	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Assessment or evaluation of training effectiveness	<input checked="" type="checkbox"/>	<input type="checkbox"/>
State Credentials – State for which roles (e.g. infant and toddler credential, directors' credential, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialized strategies to reach family, friend and neighbor caregivers	<input checked="" type="checkbox"/>	<input type="checkbox"/>

For each **Yes** response, **reference** the page(s) in the plan and briefly **describe**.

For each **No** response, **indicate** any plans the Lead Agency has to incorporate these components.

Are the professional development opportunities described in the plan available:

Note: Check either yes or no for each item):

	Yes	No
Statewide	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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To Center-based Child Care Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To Group Home Providers	<input type="checkbox"/>	<input checked="" type="checkbox"/>
To Family Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
To In-Home Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (describe): Family Friend and Neighbor Caregivers	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

A course (*Sharing Books with Babies*) on pre-literacy for providers working with infants and toddlers has been developed. Train-the-trainer courses have prepared trainers to offer the course around the state

Are program or provider-level incentives offered to encourage provider training and education?

- Yes. If yes, **describe**, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.

The *Sharing Books with Babies* course provides books to providers who participate in the course.

The Mother Goose Meets Mother Nature Curriculum provides resources for providers who attend these trainings. The most northern county was offered this training during this past year.

- No. If no, **describe** any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes?

- Yes. If yes, **describe** how the professional development plan's effectiveness/goal is assessed.

The number of trainings offered in each area of the state is tracked. Providers are surveyed on the effectiveness of the training they have received.

- No. If no, **describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement.

Does the State assess the effectiveness of specific professional development initiatives or components?

- Yes. If yes, **describe** how specific professional development initiatives or components' effectiveness is assessed.

A standardized evaluation is used in all training paid for by DHHS and offered through the Resource Development Centers. Data is compiled and reviewed.

- No. If no, **describe** any plans to include assessments of specific professional development initiatives or components' effectiveness.

As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?

- Yes. If yes, **describe** how assessment informs the professional development plan.

The Resource Development Centers survey all providers in their region on their training needs. This information is discussed at Training Coordination Team meetings. This information informs the next year's statewide training plan.

- No. If no, **describe** any plans to include assessment to inform the professional development plan.

PART 6
HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>.

6.1 Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?

- Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.
- No. If no, **describe** which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

6.1.2 Have center licensing requirements as they relate to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2)&(3))

- Yes. If yes, **describe** the changes.

Effective September 15, 2006, Child Care Centers will maintain the following minimum adult to child ratios:

<i>Age</i>	<i>Staff to Child Ratio</i>	<i>Maximum Group Size</i>
6 weeks –1 year	1:4	8
1 year – 2 ½ years	1:4	12 or
	1:5	10
2 ½ years-3 ½ years	1:7	21
3 years-Not yet school age 5 years	1:8	24 or
	1:10	20

School age 5 years- 15 years

1:13

N/A

When there is a combination of ages within a group, the group size and the number of required staff shall be determined on the basis of the age of the youngest child.

No.

6.1.3 For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.2 Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.

No. If no, **describe** which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3. Maine does not have a classification called group homes. Family child care homes are licensed to care for 3-12 children. Child Care Centers are licensed to care for 3 or more children based on the size of the facility. Centers who care for 3-12 children are called Small Facilities.

6.2.2 Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

Yes. If yes, **describe** the changes.

No.

6.2.3 For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.3 Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:

Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.

No. If no, **describe** which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.

Family providers who care for two or fewer children at one time.

6.3.2 Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

Yes. If yes, **describe** the changes. Family child care providers are now required to count their own children under ages 6 weeks to 5 year of age in the required child:staff ratio. The annual training requirement for family child care providers was increased from 6 hours per year to 12 hours per year.

No.

6.3.3 For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

6.4 Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all in-home child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?

Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.

No. If no, **describe** which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3. Providers who go to the parent's home to care for that family's children are not required to be licensed.

No person or entity shall operate a Family Child Care home for more than two (2) children, who are unrelated to the provider, without a certificate from the Department in force, authorizing such operation.

6.4.2 Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

Yes. If yes, **describe** the changes.

No.

6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
The Voucher Management Agency shall distribute Department approved materials that inform unregulated caregivers, relative caregivers, and in-home caregivers of health and safety issues, including the control of communicable disease, immunization requirements, physical premise safety and training opportunities in health and safety, first aid, CPR and early care and education.
- Building and physical premises safety
- Health and safety training
Legal, unlicensed providers must sign a statement that indicates they have met a number of health and safety requirements.

6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A))
Indicate the Lead Agency's policy regarding these relative providers:

- All** relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- All** relative providers are **exempt** from all health and safety requirements.
- Some or all** relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those requirements and identifies the relatives they apply to:

6.6 Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

- Yes. If yes, **indicate** which providers are subject to routine unannounced visits and the frequency of those visits:
All providers have a visit at (1) re-licensure, (2) one more visit during the two year period between re-licensure, and (3) any necessary follow-up visits.
- No.
- Are child care providers subject to background checks?
 - Yes. If yes, **indicate** which types of providers are subject to background checks and when such checks are conducted: Licensed family child care providers – all adult members of the household; Center-based care – all staff and regular volunteers; Legal-unlicensed providers are checked once a year. Licensed providers are checked when they first enter the system. As staff turn-over, all new staff and volunteers must have background checks – Child Protective, Motor Vehicle and State Bureau of Investigation checks.
 - No.
- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)
 - Yes. If yes, **describe** the State’s reporting requirements and how such injuries are tracked (if applicable):

Documentation of incidents. The facility shall document all accidents, injuries, or emergencies in the child's record on the day of the occurrence and make such reports available to the parent or legal guardian.

All providers and staff are mandated reporters of child abuse. If injury does not merit investigation for abuse or neglect, the child care providers must maintain a record of the incident and notify appropriate families
 - No.
- Other methods used to ensure that health and safety requirements are effectively enforced:

6.7 Exemptions from Immunization Requirements

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The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

The State exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

PART 7
HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7)

7.1 Health and Safety Requirements for Center-Based Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.2 Health and Safety Requirements for Group Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.3 Health and Safety Requirements for Family Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)

- Building and physical premises safety
- Health and safety training

7.4 Health and Safety Requirements for In-Home Providers in the Territories

(658E(c)(2)(F), §98.41(a), §98.16(j))

For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

- The prevention and control of infectious disease (including age-appropriate immunizations)
- Building and physical premises safety
- Health and safety training

7.5 Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives may be exempted from health and safety requirements: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care). (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency's policy regarding these relative providers:

- All** relative providers are subject to the same requirements as described in sections 7.1 - 7.4 above, as appropriate; there are **no exemptions** for relatives or different requirements for them.
- All** relative providers are **exempt** from all health and safety requirements.
- Some or all** relative providers are subject to **different** health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and the relatives they apply to:

7.6 Enforcement of Territorial Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively enforced:

Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?

Yes. If yes, **indicate** which providers are subject to routine unannounced visits and the frequency of those visits:

No.

Are child care providers subject to background checks?

Yes. If yes, **indicate** which types of providers are subject to background checks and when such checks are conducted:

No.

Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

Yes. If yes, **describe** the Territory's reporting requirements and how such injuries are tracked (if applicable):

No.

Other methods used to ensure that health and safety requirements are effectively enforced:

7.7 Exemptions from Territorial Immunization Requirements

The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

APPENDIX 1
PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

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- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must **define** the following *italicized* terms. (658P, 658E(c)(3)(B))

- *attending* (a job training or educational program; include minimum hours if applicable) -
Attending a job training or educational program – enrolled at least half time in any recognized school, training program, or institution of higher education
- *in loco parentis* –
An adult acting in place of a parent, such as a grandparent, foster parent, a state caseworker, and/or a legal guardian
- *job training and educational program* –
Job training program means vocational training, field training, on-the-job training, and other recognized job readiness training program focused upon the acquisition of knowledge and skills that prepare the participant for employment.
Educational Program means an elementary or secondary educational institution, a program that provides for completion of a secondary diploma or GED, a school for the handicapped, a vocational education program, or post-secondary undergraduate institution.
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) –
Children who are physically or mentally incapable of caring for themselves
- *protective services* -
Specialized casework services to neglected, abused, or exploited children and their families. Children who have legal, court-appointed guardians shall be considered to be receiving protective services
- *residing with* -
The child is living with the applicant who is maintaining a home for the child.
Maintaining a home means that the applicant is providing the main domicile for the child.
- *special needs child* –
Children with special needs who are identified with one or more of the following conditions:
 - (1.) Children with a specific diagnosis/disability which, without intervention, may impede or impair the attainment of development milestones;

(2.) Children who evidence a developmental delay in one or more of the following skill areas: cognitive, fine motor, gross motor, receptive and/or expressive language, social/emotional, or self-care

- *very low income* -
At or below 100% of the federal poverty level.
- *working* (include minimum hours if applicable) -
Gainful employment that produces earned income from wages, salaries, commissions, fees, tips or self-employment in ones' own business, professional enterprise, partnership or farm
- Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

Employed means gainful work that produces earned income from wages, salaries, commissions, fees, tips, piece rate payments, or self-employment in one's own business, professional enterprise, partnership or farm.

Attachments

- 2.1.1 Emergency Preparedness Plan
Y.I.K.E.S – Your Inventory for Keeping Everyone Safe
www.maine.gov/dhhs/occhs/publications
- 2.1.2 State Plan for Early Childhood Program Coordination
Invest in ME
http://www.maine.gov/cabinet/MAINEPLAN12D_000.pdf
- 2.2 Summary of Public Comments on State Plan from Hearings
- 2.2a Announcement of Public Hearing
- 3.1.1 Purchase of Service Manual
<http://www.maine.gov/sos/cec/rules/10/chaps10.htm>
Office of Child and Family Services 10-148 - Chapter 5
- 3.2A. Action Transmittals - Market Rate – October 2006 and July 2007
- 3.2B Market Rate Survey Instrument and Summary of Results
www.maine.gov/dhhs/occhs/publications
- 3.3.2 Purchase of Service Manual Section VI, A – Income Eligibility
<http://www.maine.gov/sos/cec/rules/10/chaps10.htm>
Office of Child and Family Services 10-148 Chapter 5
- 3.5.1. Action Transmittal – Sliding Fee Scale FY 2008
- 4.1.1 Application Blank
<http://www.maine.gov/dhhs/occhs/step.htm>
- 5.2.1 *Early Childhood Learning Guidelines – Ages 3-up to kindergarten*
Supporting Maine's Infants and Toddlers Guidelines for Learning and Development
www.maine.gov/dhhs/occhs/publications
- 5.2.3 Curriculum for the Implementation of the Early Childhood Learning Guidelines
Family Child Care Assessment - MRTQ
- 5.2.4 Report of the Early Childhood Learning Results Pilot Evaluation Results;
- 5.2.5 Development and Implementation of a Technical Assistance Network