



**Child Care and Development Fund (CCDF) Plan**

for

**State/Territory Alabama**

**FFY 2016-2018**

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016 – 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

---

Public reporting burden for this collection of information is estimated to average 162.5 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 12/31/2018**

---

---

## Table of Contents

<b>Table of Contents .....</b>	<b>2</b>
<b>Introduction and How to Approach Plan Development .....</b>	<b>4</b>
<b>1 Define CCDF Leadership and Coordination with Relevant Systems .....</b>	<b>7</b>
1.1 CCDF Leadership .....	7
1.2 CCDF Policy Decision Authority .....	9
1.3 Consultation in the Development of the CCDF Plan.....	12
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care .....	17
1.5 Optional Use of Combined Funds.....	20
1.6 Public-Private Partnerships .....	21
1.7 Coordination with Local or Regional Child Care Resource and Referral Systems.....	22
1.8 Disaster Preparedness and Response Plan.....	23
<b>2 Promote Family Engagement through Outreach and Consumer Education .....</b>	<b>25</b>
2.1 Information about Child Care Financial Assistance Program Availability and Application Process.....	26
2.2 Consumer and Provider Education Information.....	27
2.3 Website for Consumer Education.....	38
<b>3 Provide Stable Child Care Financial Assistance to Families .....</b>	<b>39</b>
3.1 Eligible Children and Families .....	40
3.2 Increasing Access for Vulnerable Children and Families .....	49
3.3 Protection for Working Parents.....	51
3.4 Family Contribution to Payment .....	54
<b>4 Ensure Equal Access to High Quality Child Care for Low-Income Children .....</b>	<b>57</b>
4.1 Parental Choice In Relation to Certificates, Grants or Contracts .....	57
4.2 Assessing Market Rates and Child Care Costs .....	60
4.3 Setting Payment Rates.....	63
4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access.....	66
4.5 Payment Practices and Timeliness of Payments .....	67
4.6 Supply Building Strategies to Meet the Needs of Certain Populations.....	70
<b>5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child     Care Settings.....</b>	<b>72</b>
5.1 Licensing Requirements and Standards.....	73
5.2 Monitoring and Enforcement Policies and Practices .....	82
5.3 Criminal Background Checks .....	90
<b>6 Recruit and Retain a Qualified and Effective Child Care Workforce .....</b>	<b>93</b>
6.1 Training and Professional Development Requirements.....	94

---

---

6.2	Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds .....	100
6.3	Early Learning and Developmental Guidelines.....	105
<b>7</b>	<b>Support Continuous Quality Improvement .....</b>	<b>108</b>
7.1	Activities to Improve the Quality of Child Care Services .....	109
7.2	Quality Rating and Improvement System.....	112
7.3	Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers .....	113
7.4	Child Care Resource & Referral .....	115
7.5	Facilitating Compliance with State Standards .....	115
7.6	Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services .....	116
7.7	Accreditation Support.....	117
7.8	Program Standards .....	117
7.9	Other Quality Improvement Activities .....	118
<b>8</b>	<b>Ensure Grantee Program Integrity and Accountability .....</b>	<b>118</b>
8.1	Program Integrity.....	119

---

---

## Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - who rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub. L. 113-186) ([https://www.acf.hhs.gov/sites/default/files/occ/child\\_care\\_and\\_development\\_block\\_grant\\_mark\\_up.pdf](https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_mark_up.pdf)). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: <http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization>. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

**CCDF Plan Overview.** The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families’ access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and implementation of these important changes are done in a thoughtful and comprehensive manner.

---

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. (658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

1. Define CCDF Leadership and Coordination with Relevant Systems
2. Promote Family Engagement through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to High Quality Child Care for Low-Income Children
5. Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of high quality care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine need for technical assistance and CCDF Plan amendments, and ultimately determine compliance with specific requirements and deadlines.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

**CCDBG Implementation Deadlines.** In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission (March 1, 2016), the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)

- 
- Current overall status for this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented
  - Specific steps (activities) you will take to complete implementation of the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)
  - Timeline for implementation including projected start date and end date for each step
  - Agency/entity responsible for completing implementation of the goal/objective, and partners who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02> and corresponding timeline of effective dates <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-cdbg-act-of-2014>).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: <https://childcareta.acf.hhs.gov/ccdf-reauthorization>. In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

**CCDF Plan Submission.** States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see <http://www.section508.gov/> for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law.

---

In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

## **1 Define CCDF Leadership and Coordination with Relevant Systems**

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

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

### **1.1 CCDF Leadership**

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance

---

with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

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

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

Name of Lead Agency: Alabama Department of Human Resources

Address of Lead Agency: 50 N Ripley Street, PO Box 304000, Montgomery, AL 36130

Name and Title of the Lead Agency Official: Nancy T. Buckner, Commissioner

Phone Number: 334-242-1162

E-Mail Address: nancy.buckner@dhr.alabama.gov

Web Address for Lead Agency (if any): www.dhr.alabama.gov

1.1.2 Who is the CCDF administrator?

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

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Faye Nelson

Title of CCDF Administrator: Acting Director

Address of CCDF Administrator: 50 N Ripley Street, PO Box 304000

Phone Number: 334-242-9378

E-Mail Address: faye.nelson@dhr.alabama.gov

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

Name of CCDF Co-Administrator \_\_\_\_\_

Title of CCDF Co-Administrator \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Description of the role of the Co-Administrator \_\_\_\_\_

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any) 334-242-1425

Web Address for CCDF program (for the public) (if any):

[www.dhr.alabama.gov/services/Child\\_Care\\_Services/Subsidy\\_Overview.aspx](http://www.dhr.alabama.gov/services/Child_Care_Services/Subsidy_Overview.aspx)

Web Address for CCDF program policy manual (if any) NA

Web Address for CCDF program administrative rules (if any) NA

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

- Outreach and Consumer Education (section 2):
  - Agency/Department/Entity : Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division
- Subsidy/Financial Assistance (section 3 and section 4)
  - Agency/Department/Entity: Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division
- Licensing/Monitoring (section 5):
  - Agency/Department/Entity: Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division, Office of Child Care Licensing
- Child Care Workforce (section 6):
  - Agency/Department/Entity: Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division
- Quality Improvement (section 7):
  - Agency/Department/Entity: Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division
- Grantee Accountability/Program Integrity (section 8):
  - Agency/Department/Entity: Alabama Department of Human Resources
  - Name of Lead Contact: Child Care Services Division

## 1.2 CCDF Policy Decision Authority

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

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

- All program rules and policies are set or established at the State/Territory level.

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

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

State/Territory

County. If checked, describe the type of eligibility policies the county can set \_\_\_\_\_

Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set \_\_\_\_\_

Other. Describe \_\_\_\_\_

Sliding fee scale is set by the:

State/Territory

County. If checked, describe the type of sliding fee scale policies the county can set \_\_\_\_\_

Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set \_\_\_\_\_

Other. Describe \_\_\_\_\_

Payment rates are set by the:

State/Territory

County. If checked, describe the type of payment rate policies the county can set \_\_\_\_\_

Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set \_\_\_\_\_

Other. Describe \_\_\_\_\_

Other. List and describe (e.g., quality improvement systems, payment practices) \_\_\_\_\_

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

a) Who determines eligibility?

- CCDF Lead Agency
- TANF agency. Describe. \_\_\_\_\_
- Other State/Territory agency. Describe. **Eligibility is determined by regional Child Care Management Agencies (CMAs). The CMAs are local community-based non-profits agencies and one state university.**
- Local government agencies such as county welfare or social services departments. Describe. \_\_\_\_\_
- Child care resource and referral agencies. Describe. \_\_\_\_\_
- Community-based organizations. Describe. **Eligibility is determined by regional Child Care Management Agencies (CMAs). The CMAs are local community-based non-profit agencies and one state university.**
- Other. Describe. \_\_\_\_\_

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

- CCDF Lead Agency
- TANF agency. Describe. \_\_\_\_\_
- Other State/Territory agency. Describe. **Regional Child Care Management Agencies CMAs and regional Quality Enhancement Agencies assist parents with locating child care. One of the regional agencies is a state university**
- Local government agencies such as county welfare or social services departments. Describe. \_\_\_\_\_
- Child care resource and referral agencies. Describe. \_\_\_\_\_
- Community-based organizations. Describe. **Regional Child Care Management Agencies CMAs and regional Quality Enhancement Agencies assist parents with locating child care. One of the regional agencies is a state university.**
- Other. Describe. \_\_\_\_\_

c) Who issues payments?

- CCDF Lead Agency
- TANF agency. Describe. \_\_\_\_\_
- Other State/Territory agency. Describe. \_\_\_\_\_
- Local government agencies such as county welfare or social services departments. Describe. \_\_\_\_\_
- Child care resource and referral agencies. Describe. \_\_\_\_\_

Community-based organizations. Describe. \_\_\_\_\_

Other. Describe. \_\_\_\_\_

### 1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at [https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf)

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

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

[REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe: **Input on the State Plan was requested from local government agencies. A letter was sent to the League of Municipalities and the Association of County Commissions of Alabama requesting input on the CCDF Plan from their membership.**

[REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe: **Input on the State Plan was requested from the Alabama Department of Early Childhood Education. This agency houses the work of the State Advisory Council through the Children's Policy Council.**

- If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
  - Yes
  - No.
- If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy \_\_\_\_\_

---

X [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with: **The Poarch Band of Creek Indians is the federally recognized tribal organization in the state. A copy of the draft plan and request for review was sent to the organization. The Poarch Band of Creek Indians has a representative on the lead agency Child Care Coordinating Committee. The Committee is charged with advising the department on child care issues and making recommendations for ongoing services.**

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

X State/Territory agency responsible for public education. Describe: **Input was requested from the Alabama State Department of Education (ALSDE). ALSDE is a member of the Lead Agency Child Care Coordinating Committee and provides input to the lead agency on CCDF policy throughout year.**

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

X State/Territory institutions for higher education, including community colleges. Describe: **A copy of the draft plan and request for input was sent to the Alabama Community College System and the Alabama Commission on Higher Education. Throughout the year the lead agency coordinates with Alabama Community College System issues related to scholarships in Child Development and Early Care and Education, credit-bearing course work for the CDA (Child Development Associate) Credential and credit for experiential learning. Alabama Community College System is a member of the Lead Agency Child Care Coordinating Committee and provides input to the lead agency on CCDF policy throughout year.**

X State/Territory agency responsible for child care licensing. Describe **The Alabama Department of Human Resources is the agency responsible for child care licensing of centers and home day care. Child Care licensing reviewed the document and completed information on the lead agency licensing standards.**

X State/Territory office/director for Head Start State collaboration. Describe: **The Alabama Department of Early Childhood Education (DECE) is houses the Head Start Collaboration Office. A copy of the draft plan and a request for comment was sent to DECE. The Head Start Collaboration office is a member of the Lead Agency Child Care Coordinating Committee and provides input to the lead agency on CCDF policy throughout year.**

X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe: **The Department of Human Resources (DHR) is the Early Head Start Child Care**

---

**Partnership grantee in Alabama. A draft plan was sent to the EHS-CCP Governance Committee and Policy Council for review and input.**

- State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe \_\_\_\_\_
- State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe \_\_\_\_\_
- Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe \_\_\_\_\_
  
- State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: **First Teacher, Alabama's Home Visiting program is housed within the Alabama Department of Early Childhood Education (DECE). A copy of the draft plan was shared with the agency for input and review.**
- Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe \_\_\_\_\_
- McKinney-Vento State coordinators for Homeless Education. Describe: \_\_\_\_\_
- State/Territory agency responsible for public health. Describe \_\_\_\_\_
- State/Territory agency responsible for mental health. Describe \_\_\_\_\_
- 
- State/Territory agency responsible for child welfare. Describe: **The CCDF Lead Agency is also the agency responsible for child welfare. A copy of the draft plan and a request for comment was sent to the State agency and to the 67 County offices that administer child welfare services locally. The County agencies were a contact point for any member of the public who wanted to review the plan or receive a copy of the Plan.**
  
- State/Territory liaison for military child care programs. Describe \_\_\_\_\_
- State/Territory agency responsible for employment services/workforce development. Describe \_\_\_\_\_
- State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe **The CCDF Lead Agency is also the agency responsible for TANF services. A copy of the draft plan and a request for comment was sent to the State agency and to the 67 County offices that administer TANF services locally. The County agencies were a contact point for any member of the public who wanted to review the plan or receive a copy of the Plan.**
  
- State/community agencies serving refugee or immigrant families. Describe \_\_\_\_\_
- Child care resource and referral agencies. Describe: **The Department contracts with regional Child Care Management Agencies (CMA) and regional Quality Enhancement Agencies (QEA) that are responsible for resource and referral within their designated region. CMAs and QEAs are local non-profit community-based agencies. A copy of the draft plan and a request for comment was sent to each organization. CMAs and QEAs**

were a contact point for any member of the public who wanted to review the plan or receive a copy of the Plan.

X Provider groups or associations. Describe: **Provider groups including FOCAL (Federation of Child Care Centers of Alabama), AALECE (Alabama Association of Licensed Early Care and Education), AAYC (Alabama Association for Young Children), Alabama Family Child Care Association were sent a draft of the plan for review. A copy of the draft plan and a request for comment was sent to each organization.**

- Worker organizations. Describe \_\_\_\_\_
- Parent groups or organizations. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

- a) Date(s) of notice of public hearing: **January 20, 2016 and January 22, 2016**  
Reminder - Must be at least 20 calendar days prior to the date of the public hearing.
- b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice. **Notice of the hearing was advertised in Alabama's eight largest newspapers. The notice advised of the date and location of the public hearing. To reinforce the notification process, notice of the public hearing was sent to the Lead Agency's 67 county offices, Child Care Management Agencies, and Quality Enhancement Agencies to facilitate broad access by the public. These agencies gave notice of the hearing through communication with parents and providers. Letters were sent to statewide provider associations within the state. Email notification and the draft plan was sent to members of Lead Agency workgroups and advisory groups, including the Child Care Coordinating Committee, the Family Child Care QRIS Standards Committee, the EHS-CCP Governance Committee and the EHS-CCP Policy Committee. Members of these workgroups and advisory groups were asked for their input on the document and to share the document with their constituents. Notice of the date and location of the public hearing was posted on the lead agency website at [www.dhr.alabama.gov](http://www.dhr.alabama.gov) .**
- c) Date(s) of public hearing(s) **February 12, 2016**  
Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.
- d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed: **Gordon Person Building Auditorium, 50 N Ripley Street,**

---

**Montgomery, AL. Montgomery, the state capital, is centrally located to allow for those who wanted to participate in person to do so without significant travel. The notice advises that written comments could be accepted by mail, email and fax and the contact information was provided in the notice.**

- e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s): **Notice of the plan was given to child care center provider associations across the state. Individual notice was written to each child care center provider association president to encourage participation by the membership. The hearing notice included an email address ([childcare.susbsidy@dhr.alabama.gov](mailto:childcare.susbsidy@dhr.alabama.gov)) to accommodate comments from providers, parents and others who could not attend the public hearing. The public hearing notice was included on the Lead Agency website. A copy of the draft Plan is placed on the Lead Agency website, is available at CMA offices and available at County Department offices. The Lead Agency website allows for the site and documents on the site to translate to multiple languages.**
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? **Public comment will be considered in understanding potential gaps in services, ways to collaborate with existing resources within the state to expand services, and exploring ways that the new services may be implemented in the future to meet the needs of families and to provide access to high quality care within the guidelines of state and federal regulations and funding priorities.**

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

- Working with advisory committees. Describe **Draft copy of the plan was made available to lead agency work groups and advisory groups Child Care Coordinating Committee; the Family Child Care QRIS Standards committee; the Early Head Start Child Care Partnership Policy Council; the Early Head Start Child Care Partnership Governance Committee;**
- Working with child care resource and referral agencies. Describe **Draft documents was provided to community-based agencies with whom the lead agencies contracts to provide resource and referral, consumer education and eligibility determinations. These agencies have local office throughout the state.**
- Providing translation in other languages. Describe: **The draft document was placed on the Lead agency website. The website has capability to translate documents in a variety of languages.**
- Making available on the Lead Agency website. List the website **The draft document is posted on the lead agencies website at [www.dhr.alabama.gov](http://www.dhr.alabama.gov).**

- 
- Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe \_\_\_\_\_
  - Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: **A draft document was provided to various stakeholders, advocate groups, provider associations and collaborative agencies: including VOICES for Alabama’s Children; Alabama Association of Licensed Early Care and Education (AALECE); Alabama Association for Young Children (AAYC); Alabama Chapter of the American Academy of Pediatrics; Parent as Teachers; HIPPY (Home Instructions for Parents of Preschool Youngsters); Alabama Home Day Care Association; FOCAL (Federation of Child Care Centers of Alabama)**
  - Other. Describe \_\_\_\_\_

#### 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

- 1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O)) Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

[REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe: **The lead agency is working on an initiative that will align the lead agencies’ Early Learning Guidelines with the, Pre-K Standards, Head Start Child Development Framework, and State Department of Education Course of Study and Extended Standards. The lead agency provides services to extend the day for children in Pre-K and Head Start programs.**

[REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with: **The Tribal Organization in Alabama is the Poarch Band of Creek**

---

**Indians. The Lead Agency makes training and professional development opportunities available to Tribal child care facilities and facilities serving Tribal families.**

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

**X [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe: The lead agency coordinates with the Department of Public Health and United Cerebral Palsy. Both agencies provide statewide support to child care programs serving all age groups of children with disabilities including infant/toddlers. The programs identify and make referrals of infants and toddlers to the Alabama Early Intervention System. United Cerebral Palsy works with child care programs to integrate adaptive concepts for children with disabilities into the program structure.**

**X [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe: The lead agency will coordinate with the Alabama State Department of Education, Head Start Collaboration Office and the Alabama Department Early Childhood Education – State Pre-K to align policy for serving homeless families with the policies already in place within these entities. The coordination will enable the lead agency to prioritize care to homeless families and thereby allowing the families to readily gain access to services.**

**X [REQUIRED] Early childhood programs serving children in foster care. Describe The Lead Agency is also the state agency for child protective services including foster care services. CCDF services coordinate with foster care unit to provide priority for care for children in foster care. Services are offered through a referral system thereby reduces the need for families to attend multiple interviews to assess eligibility.**

**X State/Territory agency responsible for child care licensing. Describe The Lead Agency is the also the state agency responsible for child care licensing. The coordination between licensing and CCDF agency helps streamline the identification of eligible providers and reduces the amount of additional documentation of requested from providers.**

State/Territory agency with Head Start State collaboration grant. Describe \_\_\_\_\_

State Advisory Council authorized by the Head Start Act. Describe \_\_\_\_\_

**X State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe: The Lead Agency is the state grantee for the Early Head Start Child Care Partnerships. The CCDF program is aligning eligibility policies with EHS-CCP to better meet the needs and streamline the eligibility process for families eligible and receiving services through both programs.**

McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe \_\_\_\_\_

---

Child care resource and referral agencies. Describe \_\_\_\_\_

State/Territory agency responsible for public education. Describe: **The Lead Agency coordinates with the Alabama Department of Education to provide quality extended-day services for school age children through grants awarded to Local Education Agencies. Funds target rural areas and low-performing school sites. The coordination also includes serving on the Advisory Panel for the 21st Century Community Learning Centers. The panel reviews application and sets criteria for agencies applying for funding. The goal of this program and agency coordination is to integrate strategies that enhance the quality of care in extended-day child care settings and increase the availability of quality out of school programs.**

State/Territory institutions for higher education, including community colleges. Describe: **The Lead Agency coordinates with Alabama Community College System two-year colleges to provide scholarships for child care providers to obtain a credential, certificate, Associate and/or Bachelor degree through the T.E.A.C.H and Leadership in Child Care Scholarship (LICC) Programs. Through collaborative efforts of the Lead Agency, Quality Enhancement Agency and Community Colleges a child care resource library is housed at three community colleges. The library is partially staffed by Child Development and Early Care and Education students at the college.**

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

Describe: **The lead agency shares information on legal operating status of child care programs with the Child and Adult Care Food Program. CACFP is notified when new program open or opened or closes. The Lead Agency shares with CACFP information on license program suspensions and revocations.**

State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe \_\_\_\_\_

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

State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe \_\_\_\_\_

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

State/Territory agency responsible for public health. Describe \_\_\_\_\_

State/Territory agency responsible for mental health. Describe \_\_\_\_\_

State/Territory agency responsible for child welfare. Describe: **The Lead Agency is also the State agency for Child Welfare services. Program coordinated allows for Protective Service and Foster Care families to receive priority for services. Child Welfare staff provides training in child abuse and neglect detection and prevention child care providers.**

- State/Territory liaison for military child care programs. Describe \_\_\_\_\_
- State/Territory agency responsible for employment services/workforce development. Describe \_\_\_\_\_
- State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe \_\_\_\_\_
- State/Territory community agencies serving refugee or immigrant families. Describe \_\_\_\_\_
- Provider groups or associations. Describe:
  - Worker organizations. Describe \_\_\_\_\_
  - Parent groups or organizations. Describe \_\_\_\_\_
  - Other. Describe \_\_\_\_\_

### 1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits ([https://www.whitehouse.gov/omb/circulars/a133\\_compliance\\_supplement\\_2014](https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014)), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

Yes. If yes, describe at a minimum:

- How do you define “combine”: **The lead agency defines “combine” as the layering of funding from different funding streams to allow for delivery of comprehensive, high quality child care services.**
- Which funds will you combine: **The lead agency is combining CCDF and Early Head Start funds through the Early Head Start - Child Care Partnership.**
- Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations: **The purpose is to increase the level of quality for infants/toddler in partnering child care centers and ensure that comprehensive services are being provided to enrolled families.**
- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) **Funding is allocated at the State level. The Lead Agency is the CCDF agency and the grantee for the Early Head Start – Child Care Partnership.**
- How are the funds tracked and method of oversight: **The funds are tracked through the Lead Agency finance division and monitoring is conducted by state level program specialists.**

No

## 1.6 Public-Private Partnerships

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

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

**The Lead Agency was awarded funding from the W. K. Kellogg Foundation to strengthen the Alabama Quality STARS child care quality rating and improvement program by focusing on**

---

professional development, infant-toddler workforce initiatives, and a statewide consumer awareness campaign.

The Lead Agency collaborates with the Alabama Partnership for Children (APC), a private nonprivate agency, to fund the TEACH Early Childhood Program. This program, along with the Lead Agency's relationship with community colleges, has allowed for increased training and educational opportunities for providers.

An ongoing relationship with the Child Care Resource Center, Employer's Child Care Alliance promotes an increase in the number of corporate partners that support quality initiatives in child care.

Many of the local agencies funded by the Lead Agency to implement Quality initiatives are developing private partnerships to supplement funding for quality activities and to maintain sustainability of quality services. Partnerships have been formed by local agencies with private partners such as W.K. Kellogg Foundation, PNC Bank and United Way.

### **1.7 Coordination with Local or Regional Child Care Resource and Referral Systems**

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) that is coordinated, to the extent determined by the State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds.

(658E(c)(3)(B)(iii)) These include:

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

- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

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

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

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

Describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs.

**Alabama contracts with community-based regional Quality Enhancement Agencies (QEAs) to maximize the quality services for children, families in Alabama. QEAs services include:**

- **Training and technical assistance to child care providers utilizing resource libraries, provider networks, mentoring, on-site training, and distance learning.**
- **Professional development activities to assist child care providers in surpassing state minimum licensing standard, obtaining credentials, certificates or degrees and to encourage providers to operate their programs consistent with effective management skills and business practices.**
- **Consumer education to inform the public about quality child care and assist families in making informed child care choices.**
- **Recruitment and training for diverse child care populations**

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

**1.8 Disaster Preparedness and Response Plan**

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

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.

- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

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

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

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

- Overall Target Completion Date (no later than September 30, 2016): **September 30, 2016.**
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): **Partially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable:  
**There are requirements within the state that address procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.**  
**There are requirements within the state that child care providers have in place procedures for staff and volunteer emergency preparedness training and practice drills**
  - Unmet requirement - Identify the requirement(s) to be implemented  
**The state has requirement regarding emergency preparedness, but these requirements are not consolidated into a coordinated Statewide Plan.**
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Review existing state requirements to incorporate into a statewide child care disaster plan.**

**Implement specific Subsidy Program policy for continued assistance during an emergency.**

- Projected start date for each activity **March 1, 2016**
- Projected end date for each activity **September 30, 2016**
- Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**
- Partners – Who is the responsible agency partnering with to complete implementation of this activity: **NA**

## **2 Promote Family Engagement through Outreach and Consumer Education**

Parents are their children’s most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to “promote involvement by parents and family members in the development of their children in child care settings.” States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children’s teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
  - a) the availability of child care assistance,
  - b) the quality of child care providers (if available),
  - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP)) for which families may also qualify.
  - d) Individuals with Disabilities Education Act (IDEA) programs and services,
  - e) Research and best practices in child development, and
  - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children

---

from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.

2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
  - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
  - b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
  - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

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

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services.

(658E(c)(2)(E)(i)(1))

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

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

**The lead agency maintains a waiting list of potentially eligible families. The lists are maintained regionally which allows the state to know where potential needs exist. The information is captured on the age of the children potentially eligible and the families.**

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

**The Lead Agency contracts with Child Care Management Agencies to provide eligibility services. These agencies also inform parents of the application process. Local County Departments of Human Resources (that are an extension of the lead agency) inform parent of the availability of services. Community-based Quality Enhancement Agencies helps the lead agency with outreach by providing information on the availability of services to child care providers. Licensing inspectors share information on the availability of services to child care providers who in turn inform parent in their programs.**

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

---

**The Lead Agency website contains program information, summary of eligibility requirements and an application with instructions on where to submit the application. The website contains a list of the Child Care Management eligibility agencies and their contact information including email. The Lead Agency has among its staff a program specialist who job duties includes responding to the public regarding availability of child care services.**

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

- Electronically via online application, mobile app or email. Provide link
- X In-person interview or orientation. Describe agencies where these may occur.  
**Community-based Child Care Management Agencies conduct interviews and determine eligibility for services. Eligibility workers travel to locations within their catchment area to complete the in-person interview so that applicants are interviewed in their county of residence.**
- X Phone
- X Mail
- At the child care site
- At a child care resource and referral agency
- Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe
- Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe
- Other strategies. Describe

## 2.2 Consumer and Provider Education Information

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

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

- Information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP)) for which families may also qualify,
- Individuals with Disabilities Education Act (IDEA) programs and services,

- 
- Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,
  - State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement)) in early childhood programs receiving CCDF.

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

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

- Overall Target Completion Date (no later than September 30, 2016) **September 30, 2016.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): **Substantially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable.
  - Unmet requirement - Identify the requirement(s) to be implemented: **The Lead Agency has not implemented policies on expulsion of preschool-aged children in child care settings.**
  - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
    - Projected start date for each activity: **March 1, 2016**
    - Projected end date for each activity: **September 30, 2016**
    - Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity: **NA**

- 
- 2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access, including accessible to persons with disabilities.
- a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public: **The lead agency has developed a brochure, Choosing Child Care in Alabama, designed to assist parents in selecting child care arrangement that best suit the family situation and child's needs. Information is also on the lead agency website.**
  - b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) **Through its contracting agencies the lead agency provides brochures on quality, information on how to select appropriate care that meets the individual child's needs, information that indicates the regulatory status of the facilities (licensed or exempt) and information on accreditation. Information provided on the agency website can be translated into multiple languages.**
  - c) Describe who you partner with to make information about the full diversity of child care choices available: **The lead agency partners with community-based Child Care Management Agencies and Quality Enhancement Agencies.**
- 2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand
- a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public: **The lead agency contracts with community-based organizations to provide information and consultation to parent, providers and the public about quality. Information is also available on the lead agency website. The lead agency maintains a Child Care Intake line where parent, providers and the public can receive information or be directed to the appropriate agency for assistance.**
  - b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.): **The lead agency provides brochures on quality, information on how to select appropriate care that meets the individual child's needs, information that indicates the regulatory status of the facilities (licensed or exempt) and information on accreditation.**
  - c) Describe who you partner with to make information about child care quality available: **The lead agency partners with community-based Quality Enhancement Agencies and Child Care Management Agencies to make the information available.**
- 2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs. For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum,

---

include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

- a) Temporary Assistance for Needy Families (TANF)

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- b) Head Start and Early Head Start Programs

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- c) Low Income Home Energy Assistance Program (LIHEAP)

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

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

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

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

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- f) Child and Adult Care Food Program(CACFP)

---

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- g) Medicaid

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas at Quality Enhancement Agencies.**

- h) Children's Health Insurance Program (CHIP)

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- i) Individuals with Disabilities Education Act (IDEA)

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

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

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

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

**Information is shared by the Child Care Management Agency eligibility workers, Quality Enhancement Agencies, the Lead Agency Child Care Intake line, and the lead agency website. Brochures and other written information is provided in resource areas and direct consultation is provided to parents during the eligibility process and at Quality Enhancement Agencies.**

- 
- 2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?
- a) Temporary Assistance for Needy Families (TANF)  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - b) Head Start and Early Head Start Programs  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - c) Low Income Home Energy Assistance Program (LIHEAP)  
**As a condition of the contract with Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - e) Women, Infants, and Children Program (WIC)  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - f) Child and Adult Care Food Program(CACFP)  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - g) Medicaid  
**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**
  - h) Children's Health Insurance Program (CHIP)

---

**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**

- i) Individuals with Disabilities Education Act (IDEA)

**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**

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

**As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**

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

- l) **As a condition of the lead agency contract with regional Quality Enhancement Agencies information is shared with providers so that providers can link families to other programs. Outreach includes community or parent newsletters and/or brochures.**

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

(658E(c)(2)(E)(VI))

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

**The lead agency through agreements with regional Quality Enhancement Agencies and Child Care Management provides written materials to parents, providers and the general public. Quality Enhancement Agencies provide community or parent newsletters and/or brochures, community awareness programs, Child development materials, presentations to community groups, information on how to recognize and choose high quality child care; and Parenting tips and support on balancing work and family life, health and safety, the value of play, the importance of early learning and early brain development.**

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

**The lead agency through contracts and agreement with partnering agencies provides written material (brochures, pamphlet) direct communication through presentations to community groups and contact with parents, training and technical assistance to child care providers on the importance of early learning and early brain development.**

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

**The lead agency partners with Regional Quality Enhancement Agencies, United Cerebral Palsy of Huntsville and the Tennessee Valley, and the Alabama Department of Public Health.**

- 2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to 1) parents, 2) providers and 3) the general public. (658E(c)(2)(E)(i)(VII))

- a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:
- i. Parents – **The Alabama Early Learning Guidelines (AELG) includes domains on self-concept/emotional development and social development. The AELG is available for parents on request and through the lead agency website.**
  - i. Providers – **The Alabama Early Learning Guidelines (AELG) Credential training includes training on the self-concept/emotional development and social development domains included in the AELG. Quality Enhancement Agencies include positive behavioral interventions in their training and technical assistance outreach to child care providers. The lead agency's agreement with United Cerebral Palsy of Huntsville and the Tennessee Valley promotes the inclusion of healthy social and emotional development and resilience in the child care setting.**
  - ii. General public - **The Alabama Early Learning Guidelines (AELG) includes domains on self-concept/emotional development and social development. The AELG is available to the public on request and through the lead agency website.**
- b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available
- Quality Enhancement Agencies – Private and Public non-profit community and state agencies providing training, technical assistance to providers and consumer education and resource and referral to parents and the general public.**
- United Cerebral Palsy of Huntsville and the Tennessee Valley – *Quality Enhancement with a Purpose* initiative**
- Alabama Department of Public Health – *Healthy Childcare Alabama* (nurse health consultants) and *Building a Health Start* (Professional Development for Caregivers of Infants and Toddlers Project).**
- c) Does the State have a written policy regarding preventing expulsion of:

- Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?
  - Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link
  - X No.
- School-age children from programs receiving child care assistance?
  - Yes. If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link
  - X No.

## 2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency policy citation(s) \_\_\_\_\_ and:
  - a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened \_\_\_\_\_
  - b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays \_\_\_\_\_
- X Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or

---

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

- Overall Target Completion Date (no later than September 30, 2016) **September 30, 2016.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Substantially implemented**

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

**A developmental checklist that can be used by parents or providers is included as a resource in the Alabama Early Learning Guidelines booklet.**

**Through the lead agency’s agreement with Alabama Department of Public Health and United Cerebral Palsy of the Huntsville and the Tennessee Valley training and technical assistance is provided to child care providers on the resources available to obtain developmental screenings, recognizing children at risk of developmental delays, and referral of children potentially eligible for Alabama’s Early Intervention System.**

**Quality Enhancement agencies train child care providers in the use of the Ages and Stages Questionnaire (ASQ) and the Developmental Checklist included in the Alabama Early Learning Guidelines credential training.**

- Unmet requirement - Identify the requirement(s) to be implemented: **Establish policy for the CCDF program to incorporate existing practices.**

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

**Convene potential partners**

**Establish definitions, timelines and criteria**

**Create an implementation strategy**

- Projected start date for each activity **April 1, 2016**
- Projected end date for each activity **September 30, 2016**
- Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**
- Partners – Who is the responsible agency partnering with to complete implementation of this activity: **Potential partners include Alabama Department of Public Health, United Cerebral Palsy, Alabama**

**Department of Early Childhood Education; Alabama  
Department of Rehabilitation –Early Intervention  
Services.**

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

- a) How does the State/Territory define substantiated parental complaint:  
**Substantiated complaints are complaints that are determined to be valid after investigation by state agency representatives.**
- b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format): **Records of substantiated complaints are maintained, in electronic format, in the lead agency licensing database. Current records are maintained for 6 years.**
- c) How does the State/Territory make substantiated parental complaints available to the public on request: **The department maintains a toll-free Child Care Intake line. The public may request substantiated complaints on any licensed programs by contacting the Intake line.**
- d) Describe how the State/Territory defines and maintains complaints from others about providers: **Complaints from others are defined and maintained in the same manner as complaints from parents.**

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

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

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other: **Language line translation services**
- None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the

---

State/Territory has the ability to have translation/interpretation in all primary and secondary languages:

**The lead agency has the ability to have translation/interpretation in all primary and secondary languages.**

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

### 2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring and inspection reports on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Provide the link to the website [redacted] and describe how the consumer education website meets the requirements to:

- a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe [redacted]
- b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe [redacted]
- c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe [redacted]
- d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe [redacted]
- e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain

language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe \_\_\_\_\_

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

- Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) **November 19, 2017 for posting of monitoring reports and September 30, 2016 for all other components.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, in progress, partially completed, substantially completed, other): Partially completed.
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable: The lead agency has implemented \_\_\_\_\_
  - Unmet Requirement(s) – Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

### **3 Provide Stable Child Care Financial Assistance to Families**

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school

---

obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families’ work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child includes that a family’s assets may not exceed \$1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children and children in foster care if served pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

### 3.1 Eligible Children and Families

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

#### 3.1.1 Eligibility Criteria Based upon Child’s Age

a) The CCDF program serves children from **birth** (weeks/months/years) to **13** years (through age 12).

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

Yes, and the upper age is **18** (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity:

**Incapacity (or incapacitated) means a physical or mental condition which, based on the conclusions of a licensed physician, psychiatrist or psychologist, renders a parent incapable of providing adequate care for a child or, in the case of a child, incapable of**

---

**caring for himself or herself. (Receipt of VA disability or SSI does not in and of itself constitute incapacity.)**

No.

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

Yes, and the upper age is \_\_\_\_\_ (may not equal or exceed age 19)

No.

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

- a) residing with – **The child must reside on a permanent basis with a parent who is a resident of the State of Alabama, meaning the parent is in the state voluntarily with the intention of making Alabama his or her home. Temporary absence from Alabama does not interrupt a parent’s residency status, provided the parent’s stated intent is to return to Alabama and the absence is not expected to exceed 30 consecutive days.**
- b) in loco parentis – **Adult relatives without legal custody or guardianship of the child; foster parents of a child in the legal custody of the Department; and, adults with whom the Department places a child for Protective Service reasons.**

3.1.3 Eligibility Criteria Based on Reason for Care

- a) How does the Lead Agency define “working, attending job training and education” for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).
- Working: **Employment for a minimum average of 15 hours per week (either alone or in combination with a job training or educational program) in any legally operating place of business from which the parent receives wages, salaries, commissions and tips equal to, or greater than, the federal minimum wage.**
  - attending job training: **Enrolled in, attending and satisfactorily participating in a job training or educational program, either alone or in combination with gainful employment, for a minimum average of 15 hours per week. (Students enrolled full-time in an educational program, in accordance with the institution’s definition of full-time are deemed to meet this requirement.)**
  - attending education: **Enrolled in, attending and satisfactorily participating in a job training or educational program, either alone or in combination with gainful employment, for a minimum average of 15 hours per week.**

**(Students enrolled full-time in an educational program, in accordance with the institution’s definition of full-time are deemed to meet this requirement.)**

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

Yes.

No. If no, describe additional requirements \_\_\_\_\_

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

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

1) Definition of protective services – **Services provided by the Department to, or on behalf of, children in response to reports of alleged abuse, neglect or exploitation.**

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

Yes.

No.

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

No

### 3.1.4 Eligibility Criteria Based on Family Income

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

- Definition of income – **The total gross monthly income of all family members.**

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum “exit” eligibility level if applicable and below the federal limit of 85% of current SMI. Note – If the income eligibility limits are not statewide, check here . Describe how many jurisdictions set their own income eligibility limits \_\_\_\_\_. Fill in the chart based on the most populous area of the state. **Income eligibility limits are statewide. No jurisdictions set their own limits.**

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	\$2,871	\$2,440	\$1,275	52%	\$1,471	60%
2	\$3,754	\$3,191	\$1,726	54%	\$1,991	62%
3	\$4,638	\$3,942	\$2,176	55%	\$2,511	64%
4	\$5,521	\$4,693	\$2,627	56%	\$3,031	65%
5	\$6,404	\$5,444	\$3,078	57%	\$3,551	65%

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

c) SMI Source and year: **Year 2016; Source: LIHEAP**

d) These eligibility limits in column (c) **became** or will become effective on **October 1, 2015**

e) Provide the link to the income eligibility limits [www.dhr.alabama.gov](http://www.dhr.alabama.gov)

### 3.1.5 Graduated Phase-Out of Assistance

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

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out \_\_\_\_\_
- Not implemented. The State must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses

here will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016): **September 30, 2016.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Substantially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable: **The Lead Agency has a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but the current upper level is below 85% of SMI.**
  - Unmet requirement - Identify the requirement(s) to be implemented: **Enhancement to eligibility data system to allow for continued eligibility up to 85% of SMI.**
    - Tasks/Activities – What steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Develop system requirements;**  
**Implement system coding;**  
**Perform user acceptance testing;**  
**Production**
      - Projected start date for each activity **April 1, 2016**
      - Projected end date for each activity: **September 1, 2016.**
      - Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity: **NA**

### 3.1.6 Fluctuation in Earnings

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

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

---

income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement: Income is averaged over

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

- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents and include in the description what information is required and how often. There are no federal requirements for specific documentation or verification procedures.

Applicant identity. Describe: **Documentation includes driver's license, work ID, birth certificate, School ID, non-drivers ID, and government issued IDs. Documentation is required at initial eligibility.**

X Applicant's relationship to the child. Describe: **Documentaion includes birth certificates, paternity affidavits, court documents, school records, other federal/state agency records. Required at initial eligibility.**

X Child's information for determining eligibility (e.g., identity, age, etc.). Describe: **Documentation includes bith certificate, paternity affadavits, court documents, school records, other federal/sate gency records.**

X Work. Describe: **Includes documentation from the employer in form of pay receipts or written statement from the employer. Required at initial eligibility and redetermination of eligibility.**

X Job training or Educational program. Describe: **Documenation from the education institution or job training agency. Required at initial eligibility and redetermination of eligibility.**

X Family income. Describe **Includes documentation from the employer in form of pay receipts or written statement from the employer, written documentation from the entity from which the income is received. Required at initial eligibility and redetermination of eligibility.**

Household composition. Describe \_\_\_\_\_

X Applicant residence. Describe: **Documentation includes rent or lease agreement, mortgage agreement, utility receipts, other state or federal agency records. Required at initial application, redetermination, and when the applicant's residence changes.**

Other. Describe \_\_\_\_\_

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

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

Time limit for making eligibility determinations. Describe length of time : **Initial applications must be approved or denied within 30 days of the application date. Redeterminations must be approved or denied no later than the last working day of the current eligibility period. Caseworkers must process information received from families within three (3) days of receipt of the information.**

Track and monitor the eligibility determination process

Other. Describe \_\_\_\_\_

None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

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

State/Territory TANF Agency: **Alabama Department of Human Resources**

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

- "appropriate child care": **Any legally operating child care provider 19 years old or older. In addition, state law requires an individual to be licensed if the individual providers care for children who are unrelated to the individual, in the individuals own home for more than four hours per day (iDHR, JPPM, section 610-A8)**
- "reasonable distance": **The distance from the home to the place of employment is unreasonable considering the expected wage and the time and cost of commuting. Employment is not considered suitable if daily commuting time exceeds two hours (iDHR, JPPM, section 505-C1g). The timeframe authorized for care may include any time affiliated with the client's participation, such as travel time, including reasonable travel to and from a child care facility (iDHR, JPPM, section 610-B5).**
- "unsuitability of informal child care": **Informal child care is care legally provided in the child's home by either a relative or non-relative or care provided out of the child's home by a relative or a license-exempted non-relative (iDHR, JPPM section 610-A6f). TANF policy does not allow payment for childcare if the individual providing the care is unrelated to the child, is not licensed, and keeps the child more than four hours per day. The individual is considered unrelated if the individual is not related to the child by**

---

blood, marriage, or adoption as follows: parent, grandparent, sibling (step or half), uncle, aunt, and spouses of these. Verify relationship only if questionable. In addition, due to wage and hour laws and DHR maximum payment restrictions, no in-home care (meaning the home of the child, but not the provider) may be authorized for less than minimum wage (IDHR, JPPM, section 610-A8).

- "affordable child care arrangements": **In determining whether or not appropriate childcare is available, the CM (casemanager) should first ask the client if s/he is able to arrange her/his own childcare at no cost. Find out who currently provides back-up childcare when needed, whether the arrangements meet the conditions for legally provided care, and the amount charged by the individual providing the care. Then determine based on the client's statement of her/his situation if that individual is both able and willing to provide childcare to enable the client to work and/or participate in JOBS activities, and if the care meets the guidelines for legal care. If so, authorize and ensure payment as appropriate. If the back-up childcare arrangement is not legal or the individual is unable to unwilling to provide the care on a regular basis, the CM must work with the client to find other means of obtaining legal childcare services. This must be done before requiring the client to participate in any activity for which the care is needed, including job search (iDHR, JPPM, section 610-B1b). The final decision as to which type of care will best meet her/his needs and the needs of each child rests with the client. However, the client may not use policy regarding parental choice to circumvent JOBS participation requirements. The client must choose from the resources that are available if the resources are appropriate, accessible, and affordable. For example, if appropriate legal childcare services are otherwise available (affordable and accessible) to the client, s/he may not, without good cause, be deferred from participation just because s/he would prefer a different arrangement (iDHR, JPPM section 610-B3b).**

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

- In writing
- Verbally
- Other. Describe \_\_\_\_\_
- List the citation to this TANF policy \_\_\_\_\_

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

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

---

## 3.2 Increasing Access for Vulnerable Children and Families

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

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

- a. Provide definition of “Children with special needs” and describe how services are prioritized

**“Children with special needs” is defined as child(ren) who is receiving protective services or foster care services from the Department and who has been determined the Department to need child care services. Children receive priority for services over other CCDF eligible children and are not subject to the waiting list.**

- b. Provide definition of “Families with very low incomes” and describe how services are prioritized

**Families with very low income is defined a families with income at or below 100% of the federal poverty level. The copayment is waived for these families.**

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

**Families receiving TANF and families who have received TANF within the past 6 months receive priority for care over other CCDF eligible families. The families are not subject to the waiting list. Parent copays are waived for TANF families who have income below 100% of the federal poverty level.**

3.2.2 Improving Access for Homeless Children and Families.

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

training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

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

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

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

Describe the following:

- a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements \_\_\_\_\_
- b. Procedures to conduct outreach to homeless families to improve access to child care services \_\_\_\_\_
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services \_\_\_\_\_

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

- Overall Target Completion Date (no later than September 30, 2016): **September 30, 2016**
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Partially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable: **The lead agency is implementing policy effective for April 1,**

---

**2016 to prioritize services to homeless families. Homeless families will receive priority over other CCDF eligible families.**

- Unmet requirement - Identify the requirement(s) to be implemented: **Conduct outreach to homeless families and provide a grace period to comply with immunizations and other health and safety requirements.**
  - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Coordinate with other agencies that serve homeless families.**  
**Coordinate immunization requirements with Office of Licensing**
    - Projected start date for each activity **January 1, 2016**
    - Projected end date for each activity **September 30, 2016**
    - Agency – Who is responsible for complete implementation of this activity **The Lead Agency – Alabama Department of Human Resources**
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity: **Alabama State Department of Education, Alabama Department of Early Childhood Education, Head Start Collaboration Office.**

### **3.3 Protection for Working Parents**

#### **3.3.1 Twelve-Month Eligibility**

The CCDBG Act of 2014 establishes a minimum 12-month eligibility and redetermination period for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) & (ii))

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

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

---

Describe the status of the State/Territory's establishment of 12-month eligibility and redetermination periods for CCDF families.

**X** Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination: **Temporary changes in work, education or training that are expected to last 90 days or less and include maternity leave, temporary lay-off, school breaks, illness of the parent or child, or seasonal break in employment (CCSPPM – Chapter 4)**

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

- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
    - Projected start date for each activity \_\_\_\_\_
    - Projected end date for each activity \_\_\_\_\_
    - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

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

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search,

---

resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

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

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

Yes, the State/Territory terminates assistance prior to 12 months due to parent’s loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency’s policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

**The lead agency terminates assistance if there is a non-temporary loss of job or cessation of education or training and the parent does not resume participation in employment or education/training requirements prior to the end of 90 day job search period (CCSPPM – Chapter 4)**

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

### 3.3.3 Prevent Disruption of Work

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

Describe the status of the State/Territory’s redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job

---

training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment. **The lead agency aligns eligibility redetermination for TANF families with the TANF program. The lead agency accepts as verified information received by the TANF, Foster Care, Protective Service Agency and the agency determining Early Head Start eligibility for the Early Head Start-Child Care Partnership program. A referral from the County Department or Early Head agency is sufficient to authorize care. The lead agency allows for application by phone or mail. (CCSPPM – Chapters 3 and Chapter 5)**
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
  - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
    - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
      - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
        - Projected start date for each activity \_\_\_\_\_
        - Projected end date for each activity \_\_\_\_\_
        - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
        - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

### 3.4 Family Contribution to Payment

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

contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

- 3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here  and describe how many jurisdictions set their own sliding fee scale \_\_\_\_\_. Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest “Entry” Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b) ?	(d) Highest “Entry” Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	NA	NA	NA	NA	NA	NA
2	\$398	\$35	9%	\$1726	\$100	6%
3	\$502	\$35	7%	\$2176	\$100	5%
4	\$606	\$35	6%	\$2627	\$100	4%
5	\$710	\$35	5%	\$3078	\$100	3%

- a) What is the effective date of the sliding fee scale(s)? **October 1, 2015**
- b) Provide the link to the sliding fee scale:  
[http://dhr.alabama.gov/services/Child\\_Care\\_Services/documents/DHRCMA1972FactSheet.pdf](http://dhr.alabama.gov/services/Child_Care_Services/documents/DHRCMA1972FactSheet.pdf)

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

- Fee is a dollar amount and
  - Fee is per child with the same fee for each child
  - Fee is per child and discounted fee for two or more children
  - Fee is per child up to a maximum per family
  - No additional fee charged after certain number of children
  - Fee is per family
- Fee is a percent of income and
  - Fee is per child with the same percentage applied for each child
  - Fee is per child and discounted percentage applied for two or more children
  - Fee is per child up to a maximum per family

- No additional percentage applied charged after certain number of children
- Fee is per family
- Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

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

- Yes, and describe those additional factors using the checkboxes below.
  - Number of hours the child is in care
  - Lower copayments for higher quality of care as defined by the State/Territory
  - Other. Describe other factors \_\_\_\_\_
- No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?

- Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is **\$502 or 30% of the 2015 federal poverty level.**
- No, the Lead Agency does not waive family contributions/co-payments.

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

- Limits the maximum co-payment per family. Describe: **The maximum copay is limited to 10% or less of family income per child.**
- Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe \_\_\_\_\_
- Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe: **Initial eligibility income must be at or below 130% of the FPL. Parents can continue eligibility until income exceeds 150% of the FPL.**
- Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying. Describe \_\_\_\_\_

---

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

Other. Describe \_\_\_\_\_

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

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

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

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

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

##### **4.1 Parental Choice In Relation to Certificates, Grants or Contracts**

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

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)) **The caseworker gives an explanation of the certificate process whenever the parent requests to change providers. Also information is found on the Parent Agreement and the Parental Choice form that is provided at each eligibility determination. The parental choice form is issued when the parent notifies the case manager of a change in providers.**

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

- Certificate form provides information about the choice of providers, including high quality providers
- Certificate is not linked to a specific provider so parents can choose provider of choice. **Parents who have not chosen a provider are issued a certificate to choose from among legally operating providers. The parent is allowed up to 10 days to make a choice of provider. Additional time is granted on a case-by-case basis when requested by the parent.**
- Consumer education materials on choosing child care
- Co-located resource and referral in eligibility offices: **Some Child Care Management Agencies are also the agency for Quality Enhancement services thereby allowing parents access to full resource and referral and eligibility services in one location.**
- Verbal communication at the time of application
- Community outreach, workshops or other in-person activities
- Other. Describe \_\_\_\_\_

4.1.3 Child Care Services Available through Grants or Contracts

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

- Yes. If yes, **describe:**
  - the type(s) of child care services available through grants or contracts \_\_\_\_\_
  - the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.) \_\_\_\_\_
  - the process for accessing grants or contracts \_\_\_\_\_
  - the range of providers available through grants or contracts \_\_\_\_\_
  - how rates for contracted slots are set through grants and contracts \_\_\_\_\_

- how the State/Territory determines which entities to contract with for increasing supply and/or improving quality \_\_\_\_\_
- if contracts are offered statewide and/or locally \_\_\_\_\_

No. If no, skip to 4.1.4. **The lead agency will offer offer contracts to Alabama Quality STARS, STAR 5 programs and offer contracts for programs to serve children with disabilities.**

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

Increase the supply of specific types of care with grants or contracts for:

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

Improve the quality of child care programs with grants or contracts for:

- Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- Programs to serve children with disabilities or special needs
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care

- Programs to serve homeless children
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
  - Urban
  - Rural
  - Other. Describe \_\_\_\_\_

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access:

**The lead agency has a statement on the provider agreement that requires the provider to certify that parents will have unrestricted access to their children. This signed agreement is renewed with the provider annually.**

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

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

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

Restricted based on provider meeting a minimum age requirement. Describe \_\_\_\_\_

Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe \_\_\_\_\_

Restricted to care by relatives. Describe:

Restricted to care for children with special needs or medical condition. Describe \_\_\_\_\_

Restricted to in-home providers that meet some basic health and safety requirements. Describe \_\_\_\_\_

Other. Describe: **The in-home care provider and parent must sign a statement certifying that they are meeting requirements of the Fair Labor Standards Act.**

No

## 4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by

---

geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval (see <http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq> ).

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

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

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

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology.

Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

- Market Rate Survey
- Alternative Methodology. Describe \_\_\_\_\_
- Both. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include

---

worker organizations prior to developing and conducting the MRS or alternative methodology. **The Market Rate Survey was conducted and completed in August 2014 prior to the requirements of the CCDBG Act of 2014.**

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

**The Market Rate survey questionnaire was developed in collaboration with Auburn Montgomery Outreach (Outreach) for use in collecting 2014 market rate data from the state's 3,022 formal child care providers. Only minor modifications were made to the questionnaire from the one used in the market rate survey conducted in 2013. Consequently, pretesting of the data collection instrument was limited to internal review by the survey consultants, as previous assessments had confirmed the validity of the questionnaire. The questionnaire was designed to supply all information that was critical to evaluating the current cost of child care across the state for various categories of providers, but at the same time, it needed to be concise enough so that it would not seriously impact the time constraints or patience of those completing the questionnaires. The Lead Agency maintains a database that includes information on family and group daycare homes, licensed centers and exempt from licensure facilities. A mailing list of all 3,022 facilities appearing on this database was prepared and a paper copy of the questionnaire was mailed to each facility. The first wave of the survey was sent out on July 9, 2014. The questionnaire was accompanied by a return envelope that was self-addressed and stamped, along with a message from the Commissioner of the lead agency urging providers to complete the survey and stressing the importance of a timely response. Potential respondents were also given an option to complete the market rate survey online by visiting the lead agency website. Informational notices about the survey were sent to all Child Care Management Agencies and Quality Enhancement Agencies to improve the survey response rate.**

**A second wave of the survey was sent out on August 7, 2014. The multiple wave research design was intended to maximize the number of providers completing the questionnaire. Data from the questionnaires received by mail were entered into an online system similar to the one that was used for online surveys. The data were then downloaded into an excel spreadsheet for cleaning and appropriate coding. The final data were analyzed using the SAS software.**

**Survey respondents were asked to indicate the type of child care facility that they operated (day care center, family day care home, group day care home, etc.) and the weekly and monthly charges for their child care services. Types of child care facilities were further classified into licensed and exempt facilities. The methodology resulted in a 65% return rate.**

- 
- 4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:
- a) Geographic area (e.g., statewide or local markets) **The survey reflects variation in price of care statewide and by region.**
  - b) Type of provider: **The provider types included in the survey were licensed and exempt child care center program and licensed family day care homes and group day care homes.**
  - c) Age of child: **Rates were obtained for care level (Infant/toddler, preschool and school-age care).**
  - d) Describe any other key variations examined by the market rate survey, such as quality level: **The survey examined any variations among licensed and license-exempt care and region of the state.**
- 4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.
- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016): **The survey was completed August 2014.**
  - b) Date report containing results was made widely available, no later than 30 days after the completion of the report. **The Market Rate Survey was conducted and completed in August 2014 prior to the requirements of the CCDBG Act of 2014.**
  - c) How the report containing results was made widely available and provide the link where the report is posted if available: **The report will be posted on the Lead agency website at [www.dhr.alabama.gov](http://www.dhr.alabama.gov) .**

### 4.3 Setting Payment Rates

- 4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here . Describe how many jurisdictions set their own payment rates. **Payment rates are set by the State.**

- a) Infant (6 months), full-time licensed center care in most populous geographic region
  - Rate **\$117** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile **46<sup>th</sup>**
- b) Infant (6 months), full-time licensed FCC care in most populous geographic region

- Rate **\$99 (Group) \$93 (Family)** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **22<sup>nd</sup> (Group); 26<sup>th</sup> (Family)**
- c) Toddler (18 months), full-time licensed center care in most populous geographic region
- Rate **\$117** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **46<sup>th</sup>**
- d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
- Rate **\$99 (Group) \$93 (Family)** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **46<sup>th</sup>**
- e) Preschooler (4 years), full-time licensed center care in most populous geographic region
- Rate **\$107** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **44<sup>th</sup>**
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
- Rate **\$95 (Group) \$87 (Family)** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **16<sup>th</sup> (Group); 22<sup>nd</sup> (Family)**
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
- Rate **\$99** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **55<sup>th</sup>**
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
- Rate **\$90 (Group) \$88 (Family)** per **weekly** unit of time (e.g., hourly, daily, weekly, monthly, etc.)
  - Percentile: **17<sup>th</sup> (Group); 22 (Family)**
- i) Describe the calculation/definition of full-time care **Full-time is care provided for more than 25 hours per week.**
- j) Provide the effective date of the payment rates: **October 1, 2016**
- k) Provide the link to the payment rates: **The above rates will post to the Lead Agency website on the effective date.**

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates

---

for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

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

- Tiered rate/rate add-on for non-traditional hours. Describe \_\_\_\_\_
- Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe \_\_\_\_\_
- Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe \_\_\_\_\_
- Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe: **Tiered rate for centers that are at STAR 4 and STAR 5 of the Alabama Quality STARS – QRIS.**
- Tiered rate/rate add-on for programs serving homeless children. Describe \_\_\_\_\_
- Other tiered rate/rate add-on beyond the base rate. Describe: **Tiered rate above the base rate for licensed programs.**
- None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology: **Current rates percentile are reflective of the 2014 Market Rate Survey results.**

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

**The lead agency will provide tiered payment allowing for payment rates above the base rate for licensed programs and programs operating at Alabama Quality STARS – QRIS STAR 4 and STAR 5 levels.**

---

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

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

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

- Payment rates are set at the 75th percentile or higher of the most recent survey. Describe \_\_\_\_\_
- Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
- Rates based on data on the cost to the provider of providing care meeting certain standards. Describe \_\_\_\_\_
- Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe \_\_\_\_\_
- Data on the proportion of children receiving subsidy being served by high-quality providers. Describe \_\_\_\_\_
- Data on where children are being served showing access to the full range of providers. Describe \_\_\_\_\_
- Data on how rates set below the 75<sup>th</sup> percentile allow CCDF families access to the same quality of care as families not receiving CCDF. Describe \_\_\_\_\_
- Feedback from parents, including parent survey or parent complaints. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

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

- Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access: **The 2014 Market Rate Survey data indicates that DHR provider subsidies for child care costs are within \$31 or less of the average market rate for all age groups of children and for all categories of providers (day care centers, family day care homes, and group day care homes) in all nine Child Care Management regions.**

---

**Tiered rates effective for October 1, 2016 are within \$26 or less of the average market rate for license/regulated care, within \$20 or less of the average market rate for STAR 4 programs, and within \$18 or less of the market rate for STAR 5 programs.**

- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
    - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
      - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
        - Projected start date for each activity \_\_\_\_\_
        - Projected end date for each activity \_\_\_\_\_
        - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
        - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

#### **4.5 Payment Practices and Timeliness of Payments**

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

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

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than September 30, 2016):
  - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **partially implemented**
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
    - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
      - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
        - Projected start date for each activity \_\_\_\_\_
        - Projected end date for each activity \_\_\_\_\_
        - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
        - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

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

- Pays prospectively prior to the delivery of services. Describe \_\_\_\_\_
- Pays within no more than 21 days of billing for services. Describe: **Direct Deposit to providers is made within 21 days of week care was provided.**

- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory's definition of occasional absences \_\_\_\_\_
- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe \_\_\_\_\_
- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe: **Payment is authorized for up to 5 absences whether or not consecutive within a month. Payment is authorized for up to 10 absences due to the illness of the child when documented by a statement from a licensed physician, psychiatrist or psychologist.**
- Pays on a full-time or part-time basis (rather than smaller increments such as hourly). **Full-time payment is authorized when the parent is participating in an activity for more than 25 hours per week. Part-time payment authorized when the parent is participating in an activity for 25 hours or less each week.**
- Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.) \_\_\_\_\_
- Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment. **A Communication Notice is sent to notify providers of changes in eligibility that impacts payment. Notices are sent to providers in the same timeframe that notices are sent to parents.**
- Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: **Providers may request a review of payment and adjustment for inaccuracies up to 30 day after the direct deposit date.**
- Other. Describe \_\_\_\_\_
- For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory: **There are significant variations in the payment practices of child care providers related to fees charged to parents. State audit procedures do not allow for prospective payments in advance of services provided.**

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

- Policy on length of time for making payments. Describe length of time: **Payments are direct deposited within 21 days of the week services were provided.**
- Track and monitor the payment process: **The lead agency payment database tracks allows state level to track payments and amount and date deposited by provider**

---

**and track amounts by parent and child. It also allows the lead agency and eligibility staff to track the accuracy fo the payment based on the child's enrollment.**

Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe:  
**Payments are made through weekly direct deposits.**

Other. Describe

#### **4.6 Supply Building Strategies to Meet the Needs of Certain Populations**

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

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

Yes. Describe data sources: **Licensing capacity numbers indicate a decline in the number of available infant/toddler slots and availability of care that targets the needs of children with disabilities. Therefore the lead agency will utilize contract slot to address these needs.**

No. If no, how does the State/Territory determine most critical supply needs? \_\_\_\_\_

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

a) Infants and toddlers (check all that apply)

Grants and contracts (as discussed in 4.1.3)

Family child care networks

Start-up funding

Technical assistance support

Recruitment of providers

Tiered payment rates (as discussed in 4.4.1)

Other. Describe \_\_\_\_\_

b) Children with disabilities (check all that apply)

Grants and contracts (as discussed in 4.1.3)

Family child care networks

Start-up funding

Technical assistance support

Recruitment of providers

Tiered payment rates (as discussed in 4.4.1)

Other. Describe \_\_\_\_\_

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

Grants and contracts (as discussed in 4.1.3)

Family child care networks

Start-up funding

Technical assistance support

Recruitment of providers

Tiered payment rates (as discussed in 4.4.1)

Other. Describe \_\_\_\_\_

d) Homeless children (check all that apply)

Grants and contracts (as discussed in 4.1.3)

Family child care networks

Start-up funding

Technical assistance support

Recruitment of providers

Tiered payment rates (as discussed in 4.4.1)

Other. Describe \_\_\_\_\_

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe: **The CCDF Lead Agency will increase child care assistance rates to licensed providers and providers with an Alabama Quality STARS rating of STAR 4 and STAR 5.**

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

---

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

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

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

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

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

---

## 5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

- 5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care:

**Licensed Centers –child care facility licensed that receives moreth than 12 children for more tha four hours a day with or without stated educational purposes.**

**Group Day Care Home – A child care facility which is a family home and which received at least seven but no more than twelve children for care during part of the day and at least two adults are present.**

**Family Day Care Home – A child care facility which is a family home and which receives not more than six children for care during the day.**

- 5.1.2 Does your State/Territory exempt any child care providers that can receive CCDF from its licensing requirements?

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

**Exempt Centers – child care programs operated by church or religious schools, public school programs, programs operated by a charitable or governmental entity, and programs operating less than 4 hours per day.**

No

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

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 5.1.4 and 5.1.5 below.

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

- Overall Target Completion Date (no later than September 30, 2016): **September 30, 2016.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Partially Implemented**

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable  
**Appropriate child to staff ratios are implemented for licensed programs.**
- Unmet requirement - Identify the requirement(s) to be implemented  
**Appropriate child to staff rations are not implemented for license exempt programs.**

**Group size is not implemented for programs**

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
Develop group size standards based on staff/child ratio and square footage.

**Regulations changes are needed to implement group size.**

- Projected start date for each activity **April 1, 2016**
- Projected end date for each activity **September 30, 2016**
- Agency – Who is responsible for complete implementation of this activity: **Lead Agency**
- Partners – Who is the responsible agency partnering with to complete implementation of this activity **NA**

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

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition: **birth to 18 months**
  - Ratio : **1:5**
  - Group size:
2. Toddler
    - State/Territory age definition: **18 months to 36 months**
    - Ratio: **1:7 for 18 months to 2 ½ years**  
**1:8 for 24 months to 36 months**
    - Group size:
  3. Preschool
    - State/Territory age definition: **2 ½ years to school age**
    - Ratio : **1:11 for ages 2 ½ years to 4 years**  
**1:18 for ages 4 years to school age**
    - Group size:
  4. School-Age
    - State/Territory age definition: **Children who are five years of age on or before September 1 (or the date on which school begins in the enrolling district pursuant to Code of Alabama 1975 Section 16-28-4) of a given year.**
    - Ratio : **1:21 for School age up to 8 years;**  
**1:22 for 8 years and older**
    - Group size:
  5. If any of the responses above are different for exempt child care centers, describe **The lead agency will have requirements in place by September 30, 2016 for exempt programs participating in the child care subsidy program. Exempt program participating in the subsidy programs will be subject to the same staff/child ratios as licensed programs.**
  6. Describe, if applicable, ratios and group sizes for centers with mixed age groups  
**Not applicable**
- b) Licensed Group Child Care Homes:
1. Infant:
    - State/Territory age definition **birth to 18months**
    - Ratio: **2:12; there shall be at least 1 caregiver for each three (3) children younger than 12 months**
    - Group size
  2. Toddler:
    - State/Territory age definition **18 months to 36 months**
    - Ratio: **2:12**
    - Group size
  3. Preschool:
    - State/Territory age definition **2 ½ years to school age**

- Ratio: **2:12**
- Group size

4. School-Age:

- State/Territory age definition
- Ratio **2:12**
- Group size

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

**The maximum number of children for group child care is 12 with two caregivers. No more than 6 children can be under 12 months. Children younger than lawful school age who live in the home are included in the child to provider ratio when they are in the home or on the premises. Children of lawful school age and older, who live in the home, shall not be counted.**

6. If any of the responses above are different for exempt group child care homes, describe:

**The state does not have a regulatory designation of exempt group child care home.**

N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

**Licensing is required if the program is serving at least one unrelated child for more than 4 hours per day and the program has not filed and met requirements for exemption from licensing.**

**Family child care home may receive up to 6 children for care. No more than 6 children can be under 12 months. Children younger than lawful school age who live in the home are included in the child to provider ratio when they are in the home or on the premises. Children of lawful school age and older, who live in the home, shall not be counted.**

2. If any of the responses above are different for exempt family child care home providers, describe:

**The state does not have a regulatory designation of exempt family child care home.**

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

**Other CCDF eligible provider categories include related care and in-home care. These categories of care do not have child-to provider ratios and there are no limits on the number of children.**

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher and assistant teacher qualifications:

**A lead teacher shall have a high school diploma or GED 12 hours of training within 30 days after employment. An assistant teacher shall have at least an 8<sup>th</sup> grade education and work under the direct supervision of a person qualified as a child teacher and shall not be counted in the staff-child ratio.**

2. Toddler lead teacher and assistant teacher qualifications:

**A lead teacher shall have a high school diploma or GED 12 hours of training within 30 days after employment. An assistant teacher shall have at least an 8<sup>th</sup> grade education and work under the direct supervision of a person qualified as a child care teacher and shall not be counted in the staff-child ratio.**

3. Preschool lead teacher and assistant teacher qualifications:

**A lead teacher shall have a high school diploma or GED 12 hours of training within 30 days after employment. An assistant teacher shall have at least an 8<sup>th</sup> grade education and work under the direct supervision of a person qualified as a child care teacher and shall not be counted in the staff-child ratio.**

4. School-Age lead teacher and assistant teacher qualifications:

**A lead teacher shall have a high school diploma or GED 12 hours of training within 30 days after employment. An assistant teacher shall have at least an 8<sup>th</sup> grade education and work under the direct supervision of a person qualified as a child care teacher and shall not be counted in the staff-child ratio.**

5. Director qualifications:

**The center director shall have at least 20 clock hours of training in administration and management and at least four clock hours of training in quality child care. In addition the director shall meet the minimum education qualification of a high school diploma or GED, 120 clock hours of training in child care and at least 12**

---

**months of experience as a child care worker/teacher or as a director/program director in a licensed day care center or a Department approved setting.**

b) Licensed Group Child Care Homes:

1. Infant lead teacher and assistant qualifications: **The caregiver shall have a high school diploma or GED and at least 24 hours of training in child development prior to initial licensing. The assistant caregiver shall have a high school diploma or GED an at least 12 hours of training within the first 30 days of employment.**
2. Toddler lead teacher and assistant qualifications **The caregiver shall have a high school diploma or GED and at least 24 hours of training in child development prior to initial licensing. The assistant caregiver shall have a high school diploma or GED an at least 12 hours of training within the first 30 days of employment.**
3. Preschool lead teacher and assistant qualifications: **The caregiver shall have a high school diploma or GED and at least 24 hours of training in child development prior to initial licensing. The assistant caregiver shall have a high school diploma or GED an at least 12 hours of training within the first 30 days of employment.**
4. School-Age lead teacher and assistant qualifications: **The caregiver shall have a high school diploma or GED and at least 24 hours of training in child development prior to initial licensing. The assistant caregiver shall have a high school diploma or GED an at least 12 hours of training within the first 30 days of employment.**

N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications: **The caregiver shall have a high school diploma or GED and at least 24 hours of training in child development prior to initial licensing.**

d) Other eligible CCDF provider qualifications.

**Licensed exempt child care centers, related providers and in-home providers do not have required qualifications for staff.**

- 5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016. Provide a citation and a link if available

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

- Overall Target Completion Date (no later than September 30, 2016)  
**September 30, 2016.**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): **substantially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable.  
**The lead agency has healthy and safety requirements for licensed child care programs in the areas identified.**

- 
- Unmet requirement - Identify the requirement(s) to be implemented.

**The lead agency does not have health and safety requirements specific to all the areas identified in the Act for license exempt programs.**

- **Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, et**
    - **Implement health and safety requirements for exempt programs participating in the Subsidy Program;**
    - **Review staffing needed to implement monitoring of additional programs for health and safety;**
    - **Notification to programs of the new requirements;**
    - **Establish implementation timeframes for programs.**
  - Projected start date for each activity **January 2016**
  - Projected end date for each activity **September 30, 2016.**
  - Agency – Who is responsible for complete implementation of this activity **Lead Agency**
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity **NA**
- b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.
- Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements \_\_\_\_\_

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

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

○ Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **Partially implemented.**

Implemented requirement(s) – Identify any requirement(s) partially or substantially implemented **The lead agency has preservice and ongoing training requirements for licensed child care programs.**

**Training requirements are in the following categories:**

- **Child Development**
- **Health, Safety and Universal precautions**
- **Quality child care and licensing**
- **The child care professional and the family**
- **Language development**
- **Positive discipline and guidance**

○ Unmet requirement - Identify the requirement(s) to be implemented. **Preservice training is not required in the areas stated by the Act. Preservice training is not required for license exempt providers.**

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

**Rule changes are needed to incorporate the training requirements into the monitoring for programs;  
Implement training requirements for exempt programs;**

**Establish and modify agreements with training agencies ensure training is available in all areas;**

**Review staffing needed to implement monitoring of additional programs.**

○ Projected start date for each activity **January 1, 2016**

○ Projected end date for each activity **September 30, 2016**

- Agency – Who is responsible for complete implementation of this activity **Lead Agency**
- Partners – Who is the responsible agency partnering with to complete implementation of this activity **NA**

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

- Nutrition (including age appropriate feeding). Describe
- Access to physical activity. Describe
- Screen time. Describe
- Caring for children with special needs. Describe
- Recognition and reporting of child abuse and neglect. Describe: **Each staff person is required by law to report known or suspected child abuse or neglect.**
- Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children’s health and safety. Describe

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.

- Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care: **Relative care providers must complete a health and safety checklist before services are approved for subsidy reimbursement. Through a contract with Family Guidance Center of Alabama the lead agency administers the Kids and Kin Relative Child Care Program. The initiative provides training and technical assistance to related child care providers to increase the quality of care in the related child care setting.**
- Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. \_\_\_\_\_
- No, relatives are not exempt from CCDF health and safety training requirements.

## 5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory has in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation \_\_\_\_\_

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

- Overall Target Completion Date (no later than September 30, 2016)  
**September 30, 2016**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **substantially implemented**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable: **All licensed providers meet this requirement.**
  - Unmet requirement - Identify the requirement(s) to be implemented: **Exempt providers are not monitored for compliance with the requirements.**
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Implement monitoring protocol for exempt programs;**
    - Review staffing needed to implement monitoring of additional programs.**
  - Projected start date for each activity **January 1, 2016**
  - Projected end date for each activity **September 30, 2016**
  - Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**

- Partners – Who is the responsible agency partnering with to complete implementation of this activity: **NA**

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

- a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))
- X Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

**The minimum requirements for licensing inspectors is a Bachelor's degree from an accredited college or university in Child Development, Early Childhood Education, Elementary Education, Home Economics with major coursework in Child Development, or a closely related field and two years of professional experience in teaching preschool or elementary children, directing day care activities, or in licensing day care facilities.**

[http://personnel.alabama.gov/Documents/Announcements/100221\\_A.pdf](http://personnel.alabama.gov/Documents/Announcements/100221_A.pdf)

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

**X** Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits:

***Minimum Standards for Day Care Centers and Nighttime Centers – Licensing inspectors conduct prelicensure inspections and conducts annual unannounced inspections.***

***Minimum Standards for Family Day Care Homes, Family Nighttime Homes and Group Day Care Homes and Group Nighttime Homes – Licensing inspectors conduct prelicensure inspections and conducts annual unannounced inspections.***

- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than November 19, 2016)
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
    - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
      - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
        - Projected start date for each activity \_\_\_\_\_
        - Projected end date for each activity \_\_\_\_\_
        - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
        - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

**c) Inspections for License-Exempt CCDF Providers (except those serving relatives) –** It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

- Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements: \_\_\_\_\_

**X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your

responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) **November 19, 2016.**
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **not yet started.**
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable:
    - Unmet requirement - Identify the requirement(s) to be implemented: License exempt providers do not receive annual inspections.
      - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)  
**Rule changes to require inspections for license exempt programs receiving subsidy funds.**  
**Establish inspection protocol for exempt programs;**  
**Review staffing needed to implement monitoring of additional programs.**
    - Projected start date for each activity **January 1, 2016.**
    - Projected end date for each activity **November 19, 2016**
    - Agency – Who is responsible for complete implementation of this activity **The Lead Agency**
    - Partners – Who is the responsible agency partnering with to complete implementation of this activity **NA**
- c) **Ratio of Licensing Inspectors** – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))
- X** Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory

ratio of licensing inspectors: **The ratio of licensing inspectors to licensed facilities is 1:66.**

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)  
\_\_\_\_\_
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

e) **Child Abuse and Neglect Reporting** – That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

Yes. Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s): **Each staff person is required by law (Code of Alabama 1975, Sectionsd 26-14-1 through 26-14-13) to report known or suspected child abuse or neglect to the County Department of Human Resources or the local chief of police or county sheriff.**

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including

---

planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

- Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care. **Relative care providers must complete a health and safety checklist before services are approved for subsidy reimbursement. Through a contract with Family Guidance Center of Alabama the lead agency administers the Kids and Kin Relative Child Care Program. The initiative provides training and technical assistance to related child care providers to increase the quality of care in the related child care setting.**

- 
- Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. \_\_\_\_\_
  - No, relatives are not exempt from inspection requirements.

### 5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories must have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as other adults in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific

---

disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory’s consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory’s requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the policy citation within the Lead Agency’s rules \_\_\_\_ and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
  - Overall Target Completion Date (no later than September 30, 2017)  
**September 30, 2017**
  - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) **substantially implemented**
    - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable:  
**The criminal background checks meets all requirements except those listed below as unmet requirements.**
    - Unmet requirement - Identify the requirement(s) to be implemented: **Criminal background check does not include a**

---

**search of the National Crime Information Center (run by the FBI) or the child abuse and neglect registry in others State where the staff member has resided over the past 5 years. The criminal background check does not include crimes of spousal abuse and arson.**

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) **Legislative action is required to change the current criminal background check requirements.**
  - Projected start date for each activity \_\_\_\_\_
  - Projected end date for each activity \_\_\_\_\_
  - Agency – Who is responsible for complete implementation of this activity: **The Lead Agency**
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity:  
**NA**

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3<sup>rd</sup> party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks. **The Lead Agency’s Office of Criminal History provides for criminal history checks through online applications and live scans of fingerprints through a third party vendor. Alabama law requires that all reports of criminal history background information received shall be confidential and marked confidential with no further disclosure and shall not be made available for public inspection.**

5.3.3 Describe how the State/Territory is assisting other States process background checks, including any agencies/entities responsible for responding to requests from other states: **The Lead Agencies Office of Criminal History has responsibilities for actions related to criminal history checks.**

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

Yes. Describe: **Within 30 days of the date of notification, an individual determined unsuitable for employment based upon a disqualifying conviction may request in writing a reversal of the determination of unsuitability if the conviction is not for a sex crime or a crime committed against a child , an elderly individual, or an individual with disabilities.**

No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?

Yes. Describe \_\_\_\_\_

No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State/Territory exempt relatives from background checks?

Yes, all relatives are exempt from all background check requirements.

Yes, some relatives are exempt from the background check requirements. If the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all). \_\_\_\_\_

No, relatives are not exempt from background checks.

5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3<sup>rd</sup> party vendor or contractor. Lead Agencies can report that no fees are charged if applicable. **The lead agency contact specifies the limit of the fees that can be charged for the background check.**

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

5.3.9 Does the Lead Agency release aggregated data by crime?

Yes. List types of crime included in the aggregated data \_\_\_\_\_

No

## 6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

---

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a “career ladder” that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children’s development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

## **6.1 Training and Professional Development Requirements**

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

- 6.1.1 Describe the status of the State/Territory’s professional development system or framework, including training and professional development requirements to enable child care providers to

---

promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

The Lead Agency assures that the State/Territory's training and professional development requirements:

- a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).
  - b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.
  - c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)
  - d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
  - e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.
- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 6.1.2 through 6.1.6 below.
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

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

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.

- State/Territory professional standards and competencies. Describe \_\_\_\_\_
- Career ladder or lattice. Describe: **The Alabama Pathways Professional Development Lattice provides early care and education professionals with a tool to track their professional development. Each individual can identify her/his current place on the Alabama Pathways Professional Development Lattice, as well as the progressive path to enhanced training and education within the field of early care and education.**
- Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe: **Articulation agreements are within two- and four-year higher education institutions. Most are local agreements but also there is articulation between the Alabama College System (2-year colleges) and the University of Alabama (one of the state's largest 4-year universities) to accept**

**child development course work obtained at an institution in the Alabama Community College System.**

- Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe \_\_\_\_\_
- Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe \_\_\_\_\_
- Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe \_\_\_\_\_
- Continuing education unit trainings and credit-bearing professional development. Describe: **Continuing Education Units (CEU) trainings are available from regional Quality Enhancement Agencies. Credit-bearing professional development is available through from Alabama Community College System through the T.E.A.C.H Early Childhood Scholarship Programs and the Leadership in Child Care Scholarship program.**
- State-approved trainings. Describe \_\_\_\_\_
- Inclusion in state and/or regional workforce and economic development plans. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

**6.1.3** Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC: **The Lead Agency convened a Professional Development Plan Steering consisting of representatives from various early care and education stakeholder groups to plan and develop the Alabama Pathways professional development system to address the training and education needs of caregivers and teachers in the field of early childhood and school-age care. The Lead Agency works was completed in 2009. The Department of Early Childhood Education (formerly the Department of Children’s Affairs) is the agency for the SAC and was a member of the Professional Development Steering Committee.**

**6.1.4** Describe how the State/Territory incorporates knowledge and application of the State’s early learning and developmental guidelines (where applicable), the State/Territory’s health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements (see Information Memorandum on Children’s Social Emotional and Behavioral Health <http://www.acf.hhs.gov/programs/occ/resource/im-2015-01>): **Training on the Alabama Early Learning Guidelines (AELG) is required for all centers participating in Alabama Quality STARS. The Quality Enhancement Agencies are required to include training on the AELG as part of their basic training requirements. The AELG includes domains on self-concept/emotional development and social development. Quality Enhancement Agencies offer**

---

a variety of training options including onsite training, day and evening sessions, training targeting teachers/caregivers of different age groups, inclusive training through the *Childcare Enhancement with a Purpose* initiative. Training is offered that meets Alabama *Minimum Standards* training requirements, CDA (Child Development Associate) subject areas, and the Alabama Pathways Professional Development core knowledge areas.

- 6.1.5 Describe how the State’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable): **All providers that receive CCDF have access and opportunities for professional development, technical assistance, and support through regional and targeted quality enhancement agencies. Providers supported through the state’s tribal organization are able to access and participate in all training available to providers receiving lead agency funding.**
- 6.1.6 Describe how the State/Territory’s training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians: **All providers including providers that receive CCDF have access and opportunities for professional development, technical assistance, and support through regional and targeted quality enhancement agencies. All lead agency funded training is free to child care providers. Quality Enhancement Agencies offer a variety of training options including onsite training, day and evening sessions, training targeting teachers/caregivers of different age groups, inclusive training through the *Childcare Enhancement with a Purpose* initiative. Training is offered that meets Alabama *Minimum Standards* training requirements, CDA (Child Development Associate) subject areas, and the Alabama Pathways Professional Development core knowledge areas.**
- 6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.
- Financial assistance for attaining credentials and post-secondary degrees. Describe \_\_\_\_\_
  - Financial incentives linked to education attainment and retention. Describe: **The T.E.A.C.H. Early Childhood Scholarship Program awards bonuses for participates who complete T.E.A.C.H. educational goals.**
  - Registered apprenticeship programs. Describe \_\_\_\_\_
  - Outreach to high school (including career and technical) students. Describe \_\_\_\_\_
  - Policies for paid sick leave. Describe \_\_\_\_\_
  - Policies for paid annual leave. Describe \_\_\_\_\_
  - Policies for health care benefits. Describe \_\_\_\_\_
  - Policies for retirement benefits. Describe \_\_\_\_\_
  - Support for providers’ mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe \_\_\_\_\_
  - Other. Describe \_\_\_\_\_

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language: **Alabama contracts with community-based regional Quality Enhancement Agencies (QEAs) to maximize the quality services for children, families in Alabama. QEAs services must include recruitment and training training of child care providers to serve diverse child care populations.**

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- CCDF health and safety requirements in non-English languages
- Provider contracts or agreements in non-English languages
- Website in non-English languages
- Bilingual caseworkers or translators available
- Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- Other **Language line and translation services available**
- None

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

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

- Yes. The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers \_\_\_\_\_
- No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities,

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

- Overall Target Completion Date (no later than September 30, 2016)  
**September 30, 2016**
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other): **Not yet started**
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented: **Training and technical assistance is not provided statewide.**
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) **Regional Quality Enhancement Agencies to include training and technical assistance on identifying and serving homeless children as part of the basic training for child care programs**
      - Projected start date for each activity **February 1, 2016**
      - Projected end date for each activity **September 30, 2016**
      - Agency – Who is responsible for complete implementation of this activity **Lead Agency**
      - Partners – Who is the responsible agency partnering with to complete implementation of this activity: **Regional Quality Enhancement Agencies**

## 6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

Yes. If yes,

- 
- a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.
- b) Indicate which funds will be used for this activity (check all that apply)
- CCDF funds. Describe: **Quality Set-aside; Infant/Toddler set-aside; Quality Expansion targeted funds; School-age resource and referral targeted funds.**
  - Other funds. Describe:
- c) Check which content is included in training and professional development activities. Check all that apply.
- Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe: **Alabama Early Learning Guidelines credential training focuses on five key domains: self-concept/emotional development, social development, language and literacy development, physical development, and cognitive development**
  - Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe \_\_\_\_\_
  - Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe \_\_\_\_\_
  - Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards. Describe \_\_\_\_\_
  - On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe \_\_\_\_\_

- Using data to guide program evaluation to ensure continuous improvement. Describe \_\_\_\_\_
- Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe \_\_\_\_\_
- Caring for and supporting the development of children with disabilities and developmental delays. Describe \_\_\_\_\_
- Supporting positive development of school-age children. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education
- Other. Describe \_\_\_\_\_

No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address training hour requirements.

Yes. If yes, describe:

a) Licensed Center-Based Care

- 1) Number of pre-service or orientation hours and any required areas/content: **Licensed center teachers are required to have 12 hours of pre-service training within 30 days of employment. All licensed child care center programs are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care**

---

and licensing; the child care professional and the family; language development; positive discipline and guidance.

- 2) Number of on-going hours and any required areas/content  
**Licensed center teachers are required to complete 12 ongoing hours of training each year.**  
**All licensed child care center programs are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care and licensing; the child care professional and the family; language development; positive discipline and guidance.**

b) Licensed Group Child Care Homes

- 1) Number of pre-service or orientation hours and any required areas/content:  
**Licensed group child care homes are required to have 12 hours of pre-service training within 30 days of employment.**  
**All licensed group child care homes are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care and licensing; the child care professional and the family; language development; positive discipline and guidance.**
- 2) Number of on-going hours and any required areas/content:  
**Licensed group child care homes are required to complete 12 ongoing hours of training each year.**  
**All licensed group child care homes are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care and licensing; the child care professional and the family; language development; positive discipline and guidance.**

c) Licensed Family Child Care Provider

- 1) Number of pre-service or orientation hours and any required areas/content:  
**Licensed family child care homes are required to have 12 hours of pre-service training within 30 days of employment.**  
**All family child care homes are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care and licensing; the child care professional and the family; language development; positive discipline and guidance.**
- 2) Number of on-going hours and any required areas/content:  
**Licensed family child care homes are required to complete 12 ongoing hours of training each year.**  
**All licensed family child care homes are required to obtain training in the following categories, in addition to CPR and First Aid Training: child development; health, safety and universal precautions; quality child care and licensing; the child care professional and the family; language development; positive discipline and guidance.**

d) Any other eligible CCDF provider

- 1) Number of pre-service or orientation hours and any required areas/content:  
**Other CCDF eligible providers are not currently required to have pre-service or orientation hours.**
- 2) Number of on-going hours and any required areas/content \_\_\_\_\_

No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

Fully implemented as of March 1, 2016. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance: **Alabama contracts with state agency and community-based Quality Enhancement Agencies (QEAs) to maximize the quality services for children, families in Alabama. QEAs offer training and supports to encourage providers to operate their programs consistent with effective management skills and business practices. Training includes Director's forums that include training specific to the managerial duties of child care directors and owners, training on using computers and social media, budgeting, program marketing and community outreach.**

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

- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
  - Projected start date for each activity \_\_\_\_\_
  - Projected end date for each activity \_\_\_\_\_
  - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
  - Partners – Who is the responsible agency partnering with to complete implementation of this activity \_\_\_\_\_

### 6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory’s early learning and development guidelines appropriate for children from birth to kindergarten entry.

- The State/Territory assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
  - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
  - Updated as determined by the State. List the date or frequency: **Alabama’s Early Learning Guidelines were revised in 2014**
- Fully implemented and meeting all Federal requirements outlined above as of March 1, 2016. List the Lead Agency’s policy citation(s) and describe using 6.3.2 through 6.3.4 below
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target

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

- Overall Target Completion Date (no later than September 30, 2016) \_\_\_\_\_
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) \_\_\_\_\_
  - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable \_\_\_\_\_
  - Unmet requirement - Identify the requirement(s) to be implemented \_\_\_\_\_
    - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) \_\_\_\_\_
      - Projected start date for each activity \_\_\_\_\_
      - Projected end date for each activity \_\_\_\_\_
      - Agency – Who is responsible for complete implementation of this activity \_\_\_\_\_
      - Partners – Who is the responsible agency partnering with to complete implement this activity \_\_\_\_\_

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

Birth-to-three. Provide a link \_\_\_\_\_

Three-to-Five. Provide a link \_\_\_\_\_

Birth-to-Five. Provide a link: <http://dhr.alabama.gov/documents/AELG.pdf> . **This link is for the Early Learning Guidelines established prior to 2014. The revised guidelines are not available online.**

Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards). Describe and provide a link \_\_\_\_\_

Other. Describe \_\_\_\_\_

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children’s cognitive, physical, social and emotional development and support children’s overall well-being?

Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

No, but the State/Territory is in the development phase

No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

Child care providers are supported in developing and implementing curriculum/learning activities based on the State’s/Territory’s early learning and development guidelines. Describe \_\_\_\_\_

The technical assistance is linked to the State’s/Territory’s quality rating and improvement system. Describe \_\_\_\_\_

Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe: **Quality Enhancement Agencies provide training on the Alabama Early Learning Guidelines. The training includes implementation strategies. These agencies also provide technical assistance to programs on implementation through consultation or onsite modeling.**

Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe: **Quality Enhancement Agencies provide training on the Alabama Early Learning Guidelines. The training includes implementation strategies. These agencies also provide technical assistance to programs on implementation through consultation or onsite modeling.**

Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe \_\_\_\_\_

b) Indicate which funds are used for this activity (check all that apply)

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) **Quality set- aside, Infant/Toddler set-aside, and Quality expansion targeted funds.**

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

---

6.3.4 Check here  to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

- 
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
  - 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
  - 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
  - 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
  - 8) Supporting providers in the voluntary pursuit of accreditation
  - 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
  - 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

## **7.1 Activities to Improve the Quality of Child Care Services**

- 7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services: **The overarching goals of quality improvement activities is to enhance the quality of child care, to positively impact the early learning experiences of young children and support the training and education needs of caregivers and teachers in the field of early childhood and school-age care. The 2014 Needs Assessment conducted by the Children’s Policy Council, which serves as the State Advisory Council, listed Early Learning as one of the top 12 issues impacting Alabama’s children. The needs assessment identified school readiness and quality childcare as specific areas of need. The goals of quality improvement target these identified needs.**
- 7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:
- Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.

Indicate which funds will be used for this activity (check all that apply)

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) **Quality set-aside**

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.): **Private funding from the W.K. Kellogg Foundation.**

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.

Indicate which funds will be used for this activity (check all that apply)

CCDF funds. Describe CCDF funds (e.g., quality set-aside,, including whether designated infant- and toddler set aside, etc.) funds are being used along with other CCDF funds: **Infant/Toddler set-aside and Quality set-aside.**

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) **Private funding from the W.K. Kellogg Foundation.**

Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.

Indicate which funds will be used for this activity (check all that apply)

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.): **Quality set-aside.**

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.

Indicate which funds will be used for this activity (check all that apply)

CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) **Quality set-aside**

Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

- 
- Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.
    - Indicate which funds will be used for this activity (check all that apply)
      - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) \_\_\_\_\_
      - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_
  - Supporting accreditation. If checked, respond to 7.7.
    - Indicate which funds will be used for this activity (check all that apply)
      - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) **Quality set-aside; Quality expansion target funds.**
      - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_
  - Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.
    - Indicate which funds will be used for this activity (check all that apply)
      - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) \_\_\_\_\_
      - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_
  - Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.
    - Indicate which funds will be used for this activity (check all that apply)
      - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) \_\_\_\_\_
      - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) \_\_\_\_\_

---

## 7.2 Quality Rating and Improvement System

### 7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available **Alabama QRIS – Alabama Quality STARS is state administered and will begin operating statewide for center child care programs in March 2016.**

Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide. Provide a link, if available \_\_\_\_\_

No, but the State/Territory is in the development phase

No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

Participation is voluntary

Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.) \_\_\_\_\_

Participation is required for all providers

Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

Supports and assesses the quality of child care providers in the State/Territory

Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

Embeds licensing into the QRIS. Describe: **Centers participating must be licensed.**

Designed to improve the quality of different types of child care providers and services

Describes the safety of child care facilities

Addresses the business practices of programs

Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled

Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe

---

how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality:

- Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State pre-kindergarten or preschool program
- Local district supported pre-kindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Other. Describe. **Programs that cannot be licensed by the lead agency but are regulated by a federal agency or another state agency.**

Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. **The following performance measures are used: Number of Participants and Programs reached by program quality initiatives; Number of technical assistance visits provided and type of provider setting receiving technical assistance visits; and Impact of professional development initiatives on quality indicators such as: Business and Management Skills, Child Development, Health and Safety, Inclusion, Ongoing Training to Meet Minimum Standards and Parent Involvement**

### **7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers**

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

---

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe \_\_\_\_\_
- Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe \_\_\_\_\_
- Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe \_\_\_\_\_
- Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe \_\_\_\_\_
- Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists. Describe \_\_\_\_\_
- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe \_\_\_\_\_
- Developing infant and toddler components within the State's/Territory's QRIS. Describe \_\_\_\_\_
- Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe \_\_\_\_\_
- Developing infant and toddler components within the early learning and development guidelines. Describe: **The Alabama Early Learning Guidelines includes developmental domains for children for infants and toddlers.**
- Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe \_\_\_\_\_
- Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_

---

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory: **The Lead Agency will monitoring of implementation of the Alabama Quality STARS - QRIS for center providers to collect information on the number of programs obtaining STAR levels and continue monitoring of caregivers/teachers receiving the Alabama Early Learning Guidelines credential. All Lead Agency quality training activities are evaluated using a pre- and posttest of participant knowledge and understanding of the concepts presented in training. Quality Enhancement Agencies are required to submit quarterly status reports that include information regarding training, consultations, technical assistance, and other quality activities. Lead Agency will monitor the number programs achieving higher levels of professional development that serve Subsidy children. Through the Alabama Pathways professional development registry the lead agency will have the capacity to monitor the levels of professional development of caregivers in programs participating in the Alabama Quality STARS.**

#### 7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system (as discussed in Section 1.7)

State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary: **The lead agency contracts with eight non-profit community based agencies and one state university to provide child care resource and referral services. The agencies referred to as Quality Enhancement Agencies (QEA) service all 67 counties in Alabama. Each agency has a catchment area of 5 to 12 counties where services are provided. The agencies meet quarterly with the lead agency to discuss shared goals, implementation strategies and collaborative activities with other agencies.**

State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe \_\_\_\_\_

State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: **All Lead Agency quality training activities are evaluated using a pre- and post-test of participant knowledge and understanding of the concepts presented in training. Quality Enhancement Agencies are required to submit quarterly status reports that include information regarding training, consultations, technical assistance, and other quality activities. Lead Agency will monitor the results of the training offered by Quality Enhancement agencies. The lead agency will monitor the number of and types of programs participating quality activities.**

#### 7.5 Facilitating Compliance with State Standards

- 
- 7.5.1** What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe: **The lead agency funds licensing inspectors who conduct annual monitoring of compliance with required health and safety, training, and licensing standards. Alabama Quality Enhancement Agencies (QEAs) provide training to child care programs. QEAs provide provider training (including on-site), technical assistance and supports to providers to help them maintain and exceeding licensing Minimum Standards.**
- 7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: **Licensing inspectors receive training on the licensing standards and the monitoring process and an evaluation of job performance is conducted annually.**
- 7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**
- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children: **With the implementation of Alabama Quality STARS the lead agency will measure the number of low-income subsidy eligible children enrolled in STAR rated programs. The lead agency will also measure the number of children enrolled in nationally accredited programs. Quality Enhancement Agencies offer basic training to child care programs on the Environmental Rating Scales tools and the Program Administrative Scale. The QEAs will conduct a review using the tools for programs participating in Alabama Quality STARS.**
- 7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: **The state will evaluate improvement in scores on the Environment Rating Scales and Program Administration Scale assessment. The lead agency will evaluate the movement of programs toward researched based curriculums. Using the data from the T.E.A.C.H Early Childhood Scholarship program, the Leadership in Child Care Scholarship program and the Alabama Pathways Professional Development registry the lead agency will monitor professional development achievements of caregivers/teachers.**

---

## 7.7 Accreditation Support

- 7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation: **The Lead Agency provides training, technical assistance, on-site coaching/mentoring to child care providers to achieve accreditation. Supports are offered statewide for Home child care providers through an agreement with Auburn University Family Child Care Partnership. The initiatives support Home providers working to achieve NAFCC (National Association of Family Child Care) accreditation.**

**Accreditation supports are offered to Quality Enhancement Agencies for center programs. The agencies support providers working to achieve NAEYC (National Association for the Education of Young Children).**

- Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe \_\_\_\_\_
- No, but the State/Territory is in the development phase
- No, the State/Territory has no plans for development
- 7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: **The lead agency will evaluate progress by tracking the number of new programs participating in accreditation initiatives, the number of new programs achieving accreditation during the fiscal year, the number of accredited programs maintaining accreditation, and the number of programs making progress beyond the initial baseline assessment.**

## 7.8 Program Standards

- 7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe: **The lead agency is planning to collaborate with the state's Help Me Grow – Alabama initiative and Strengthening Family initiative increase the lead agency's ability to link families with community resources and support family engagement.**
- 7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: **The lead agency will evaluate the family's access, specifically Subsidy eligible families, to these services.**

---

## 7.9 Other Quality Improvement Activities

- 7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten: **The lead agency has developed a Infant - Toddler Professional Development Network to improve the professional practice of Alabama's infant-toddler teachers. The Networks mission is to increase the educational level and skills of infant-toddler teachers, support teachers in their classrooms by providing one-on-one guidance and provide technical assistance for teachers as they develop personalized professional development plans. This project is funded through a grant from the W.K. Kellogg Foundation.**

## 8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

---

## 8.1 Program Integrity

- 8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements.

**The lead agencies has had program integrity policies in place since 2011 that address the requirements of the CCDBG Act of 2014 including definitions of violations that include administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional.**

- 8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

- Issue policy change notices
- Issue new policy manual (Policy manual updates)
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor implementation of the new policies. Describe **State Level staff conduct on-site compliance visits as well as on-site technical assistance visits**
- Other. Describe \_\_\_\_\_

- 8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

**Definition:** “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

---

The Child Care Management Agencies (CMAs) and Quality Enhancement Agencies (QEAs) are monitored by the Department to determine contract compliance as well as compliance with applicable federal and state laws and regulations and departmental policies and procedures. Agencies are selected through a competitive Request for Proposal (RFP) process. The current contracts were issued for a two-year time frame with an option for renewal or extension of the contract. If a contract is extended or renewed, the contracting agency must submit a new budget for review and approval. State level staff provides training and technical assistance to contractors on all issues including budget and policy. A policy specialist provides clarification as needed and conducts training on policy issues. QEA agencies submit quarterly reports of activities that are compared with the services to be performed as outline in the contract. Program monitoring by Lead Agency staff is conducted on a random sample of records from each CMA agency to ensure proper application of program policies. During the monitoring visits, case records and provider records are randomly selected and reviewed for compliance with subsidy policy and procedures. Cases are review for correct application of policy as well as correct knowledge of child care computer system data entry. Agencies are sent a formal report of the results of the monitoring review. The report summarizes the number and percentage of authorization errors. Agencies are required to submit a Corrective Action Plan detailing how the agency will address the identified errors, implement procedures with caseworkers to reduce future errors, and implement actions to recover improper payments. At the next review, progress on the corrective action plan is monitored by Lead Agency staff. Agencies have been given an error rate target. Agencies that do not meet the error rate target have points deducted from their score in subsequent response to a Request for Proposal to administer Subsidy Program eligibility services.

- 8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.
- a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.
- X** Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- X** Run system reports that flag errors (include types). Describe: ***Inactivity Report*** - indicates parents who have not utilized child care services, this could indicate parent has changed providers or that services are no longer needed but the parent has failed to

---

contact agency; *New Provider Report and Inactive Provider Report* - details providers new to system and providers no longer participating so that appropriate actions can be taken with the children enrolled or seeking to enroll with the provider. *Underutilization Report* - indicates children who are not attending at the authorized level, contact can be made to determine if services are still needed or a change in level of services is needed. The Department can also create ad hoc reports when needed for special circumstances.

- X Review of enrollment documents, attendance or billing records
- X Conduct supervisory staff reviews or quality assurance reviews
- X Audit provider records
- X Train staff on policy and/or audits
- Other. Describe \_\_\_\_\_
- None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines \_\_\_\_\_

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

- X Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- X Run system reports that flag errors (include types). Describe:

**The Department's Child Care Management System (CCMS) and Time and Attendance System (TAS) generate monthly and weekly administrative reports. CCMS allows state staff to view eligibility determinations made by local agencies. The system has audit trail capability to track changes made changes to a specific case, the specific user who made the change and what changes were made. Demographic information and licensing status is entered only by licensing staff which prevents the creation of provider records for centers that are not legally operating and prevents continued payment to program no longer legally operating. The Department can also create ad hoc reports when needed for special circumstances.**

Management reports within TAS include: *Adjustment Summary Report* of all adjustment to payments (credit or debit), the user who completed the adjustment and the date; *New Provider Report and Inactive Provider Report* - detail providers new to system and providers no longer participating so that appropriate actions can be taken with the children enrolled or seeking to enroll with the provider. *Underutilization Report* - indicates children who are not attending at the authorized level, contact can be made to determine if services are still needed or a change in level of services is needed.

- X Review of enrollment documents, attendance or billing records
- X Conduct supervisory staff reviews or quality assurance reviews
- X Audit provider records

- Train staff on policy and/or audits
- Other. Describe \_\_\_\_\_
- None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines \_\_\_\_\_

8.1.5 Which activities (or describe under “Other”) the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under “Other”) the Lead Agency will use for unintentional program violations?

- Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount **\$35.00**
- Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- Recover through repayment plans
- Reduce payments in subsequent months
- Recover through State/Territory tax intercepts
- Recover through other means
- Establish a unit to investigate and collect improper payments. Describe \_\_\_\_\_
- Other. Describe \_\_\_\_\_
- None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines \_\_\_\_\_

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount **\$35.00**
- Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement) **for intentional fraud that exceeds \$2500.00.**
- Recover through repayment plans
- Reduce payments in subsequent months
- Recover through State/Territory tax intercepts
- Recover through other means
- Establish a unit to investigate and collect improper payments. Describe composition of unit below
- Other. Describe \_\_\_\_\_
- None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines \_\_\_\_\_

c) Check which activities the Lead Agency will use for administrative error?

- Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount **\$35.00**
- Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- Recover through repayment plans
- Reduce payments in subsequent months
- Recover through State/Territory tax intercepts
- Recover through other means
- Establish a unit to investigate and collect improper payments. Describe composition of unit below
- Other. Describe \_\_\_\_\_
- None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines \_\_\_\_\_

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. **Parents and providers who commit intentional program violations are sanctioned for three (3) months for the first offense, six (6) months for the second offense and one year for the third and any subsequent offenses. Sanctions means the parent or provider cannot participate in the program during the sanction period.****

**Clients have the right to request an administrative review or an administrative hearing, within 60 days in response to any action taken to deny, reduce, or terminate services, if the client feels such action was taken outside the context of Program policy.**

**Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. **Providers who commit intentional program violations are sanctioned for three (3) months for the first offense, six (6) months for the second offense and one year for the third and any subsequent offenses. Sanctions means the provider cannot participate in the program during the sanction period.****

**A child care provider has the right to request a fair hearing in response to any action to deny or terminate Program participation.**

- Prosecute criminally in cases of fraud that that exceeds \$2500.00**
- Other. Describe \_\_\_\_\_