CHILD CARE AND DEVELOPMENT FUND PLAN

FOR:

Ohio Department of Job and Family Services

FFY 2010-2011

This Plan describes the CCDF program to be conducted by the State/Territory for the period 10/1/09 – 9/30/11. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

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

Public reporting burden for this collection of information is estimated to average 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 04/30/2012]

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AMENDMENTS LOG

CHILD CARE AND DEVELOPMENT FUND PLAN FOR: ODJFS
FOR THE PERIOD: 10/1/09 – 9/30/11

Lead Agencies must submit plan amendments within 60 days of the effective date of an amendment (§98.18 (b)).

Instructions for Amendments:

1) Lead Agency completes the first 3 columns of the Amendment Log and sends a photocopy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.
2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF

PART 1
ADMINISTRATION

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

1.1 Lead Agency Information (as designated by State/Territory Chief Executive Officer)

Name of Lead Agency: *Ohio Department of Job and Family Services*
Address of Lead Agency: *30 East Broad Street, 32nd Floor, Columbus, OH 43215*
Name and Title of the Lead Agency's Chief Executive Officer: *Douglas Lumpkin, Director*
Phone Number: *614-466-6283*
Fax Number: *614-466-2815*
E-Mail Address: *Douglas.Lumpkin@jfs.ohio.gov*
Web Address for Lead Agency (if any): www.*jfs.ohio.gov*

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

Name of the State/Territory Child Care Contact (CCDF): *Terrie Hare*
Title of State/Territory Child Care Contact: *Chief, Bureau of Child Care & Development*
Address: *50 W. Town Street, Suite 400, 6th Floor, Columbus, Ohio 43215*
Phone Number: *614-752-0580*
Fax Number: *614-728-6803*
E-Mail Address: *Terrie.Hare@jfs.ohio.gov*
Phone Number for CCDF program information (for the public) (if any): *614-466-1213*
Web Address for CCDF program information (for the public) (if any): www.*jfs.ohio.gov/cdc*

1.3 Estimated Funding

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2009 through September 30, 2010. (§98.13(a))

CCDF: *$237,910,613*
Federal TANF Transfer to CCDF: $*0*
Direct Federal TANF Spending on Child Care: *$364,536,201*
State CCDF Maintenance of Effort Funds: *$45,403,943*
State Matching Funds: *$43,011,745*
Total Funds Available: *$690,862,502*

1.4 Estimated Administration Cost

The Lead Agency estimates that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): *$12,000,000* (*5.0* %). (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

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

☐ Yes.

☒ No. If no, use **Table 1.5.1** below to **identify** the name and type of agency that delivers services and activities. If more than one agency performs the task, identify all agencies in the box under "Agency," and **indicate** in the box to the right whether each is a non-government entity.

Table 1.5.1: Administration of the Program

Service/Activity	**Agency**	**Non-Government Entity (see Guidance for definition)**
Determines individual eligibility:		
a) TANF families	County Department of Job and Family Services (CDJFS)	☐ Yes ☒ No
b) Non-TANF families	CDJFS	☐ Yes ☒ No
Assists parents in locating care	CDJFS, Local Child Care Resource and Referral Agencies (CCR&R)	☒ Yes – CCR&R-non-gov ☒ No – CDJFS-gov
Makes the provider payment	CDJFS and County Auditor's Office	☐ Yes ☒ No
Quality activities	CDJFS and ODJFS	☐ Yes ☒ No
Other:		☐ Yes ☐ No

1.5.2. **Describe** how the Lead Agency maintains overall internal control for ensuring that the CCDF program is administered according to the rules established for the program (§98.11).

Ohio is a state-supervised, county-administered state. Ohio Revised Code (ORC) 329.04 specifies that the county department of job and family services (CDJFS) shall have, exercise, and perform any duties assigned by the Ohio Department of Job and Family Services (ODJFS) regarding the provision of publicly funded social services to prevent or reduce economic or personal dependency and to strengthen family life. Such public social services include child care services. This responsibility is controlled through the ORC and is clarified and/or amplified by rules promulgated and reflected in the Ohio Administrative Code (OAC). OAC rules, combined with regular reporting and monitoring of practice and expenditures, provides the lead agency with adequate control mechanisms, including adherence to Generally Accepted Accounting Principles (GAAP) to insure adherence to CFR 658D(b)(1)(A), 98.11. OAC rules provide specific direction on implementation and reimbursement for all publicly-funded child care programs.

The CDJFS are responsible for the provision of subsidized child care services including: eligibility determination; family child care provider certification and payment to providers for child care services. The CDJFS may contract with child care providers or child care resource and referral agencies to conduct all or part of the eligibility determination, child care home provider certification processes and assisting families with finding child care services.

All applicants for child care services offered through the CDJFS have an appeal process that provides for:

I. a county conference;
II. a state hearing;
III. an administrative appeal process; and
IV. civil action.

Procedures, rules and forms regarding the appeal process for child care services applicants are contained in Chapter 5101:6 of the OAC.

Child Care program implementation rules are contained within Chapters 5101:2-12, 5101:2-13, 5101:2-14, 5101:2-16 and 5101:2-18. These OAC rules govern program implementation and reimbursement procedures.

In addition to the promulgation of OAC rules, ODJFS is responsible for fiscal and program monitoring of CDJFS implementation of all publicly funded programs. While these rules present coordinated programmatic eligibility, a coding mechanism has been issued through ODJFS Administrative Procedure Manual regulations
5101:9 which directs the CDJFS to appropriately code child care expenditures in accordance with a family's eligibility.

Each family's eligibility is assigned to one or more specific child care codes based on the family's need for child care services (e.g., TANF, employment, and training). These codes are used in the CDJFS expenditure claims to ODJFS/BCCD. ODJFS/BCCD monitors fiscal compliance of CDJFS annually. ODJFS/BCCD monitors CDJFS child care utilization and expenditures through the ODJFS/BCCD 3299 Child Care On-line Reporting System.

ODJFS/BCCD licenses, monitors and inspects Head Start Centers, child care centers and Type A family child care homes (a permanent residence of the administrator in which child care is provided for seven to twelve children at one time or a permanent residence of the administrator in which child care is provided for four to twelve children at one time if four or more children at one time are under two years of age) for basic health and safety regulation compliance. The Ohio Department of Education (ODE) licenses school-based centers.

CDJFS are responsible for certifying, monitoring and inspecting Type B family child care homes (a permanent residence of the provider in which child care or publicly funded child care is provided for one to six children at one time and in which no more than three children are under two years of age at one time) and in-home aides who provide publicly funded child care in the child's home. OAC rules provide specific instruction on the implementation of the Type B family child care home program and the in-home aide program.

1.5.3. **Describe** how the Lead Agency ensures adequate personnel, resources, systems, internal controls, and other components necessary for meeting CCDF reporting requirements (658K, §98.67, §§98.70 & 98.71, §§98.100 to 102), including the Lead Agency's plans for addressing any reporting deficiencies, if applicable. At a minimum, the description should address efforts for the following reporting requirements:

a) Fiscal Reporting
The fiscal controls includes the separation of duties and responsibilities for initiating, approving, making payments, reconciliation of accounts, reporting, and audit (internal and external) reviews.

b) Data Reporting
Ohio has a system to collect appropriate data for federal reporting. Local agency staff and state staff are assigned to ensure the input of data is accurate and current. Automated functions have been developed to administer the necessary transfer of data both from local agencies to the state and from the state to the federal government. These Automated functions will run with minimal staff intervention.

C) Error Rate Reporting

Ohio has business processes in place to meet the mandatory Federal Improper Payment Error Rate reporting requirements of each three year period. Ohio administers the business process annually.

1.6 Funds Used to Match CCDF

1.6.1 Will the Lead Agency use public funds to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

☐ Yes, **describe** the activity and source of funds: _____

☒ No.

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

☐ Yes. If yes, are those funds: (**check one below**)

☐ Donated directly to the State?

☐ Donated to a separate entity or entities designated to receive private donated funds?

a) How many entities are designated to receive private donated funds?

b) **Provide** information below for each entity:
Name: _____
Address: _____
Contact: _____
Type: _____

☒ No.

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

☐ Yes (**respond to 1.6.5)**, and:

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

b) (_____ %) Estimated percentage of the MOE requirement that will be met with Pre-K expenditures. (Not to exceed 20%.)

c) If the Lead Agency uses Pre-K expenditures to meet more than 10% of the MOE requirement, **describe** how the Lead Agency will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

☒ No.

1.6.4 During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF Matching Fund requirements? (§98.53(h))

☐ Yes (**respond to 1.6.5)**, and

a) (_____ %) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 30%.)

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

☒ No.

1.6.5 If the Lead Agency indicated "yes" to 1.6.3 or 1.6.4, **describe** Lead Agency efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

1.6.6 Will the Lead Agency use any other funds to meet a part of the CCDF Match requirement pursuant to §98.53(e)(1)?

☐ Yes, **describe** the activity and source of funds:

☒ No.

1.7 Improper Payments

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

☒ Yes, and these strategies are:
Ohio is participating in the Federal Improper Payment Error Rate Project and administering the review annually.

☐ No. If no, are there plans underway to determine and implement such strategies?

☐ Yes, and these planned strategies are: _____

☐ No.

PART 2
DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

Indicate the entities with which the Lead Agency has a) **consulted** and b) **coordinated** (as defined below), by checking the appropriate box(es) in Table 2.1.1.

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

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

Table 2.1.1 Consultation and Coordination

Agency	a) Consultation in Development of the Plan	b) Coordination with Service Delivery
Representatives of local government	☒ *	☐
Other Federal, State, local, Tribal (if applicable), and/or private agencies providing child care and early childhood development services.	☐	☒ *
Public health	☐	☒ *
Employment services / workforce development	☐	☒ *
Public education	☐	☒ *
TANF	☐	☒ *

Agency	a) Consultation in Development of the Plan	b) Coordination with Service Delivery
Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State	☐	☐*
State/Tribal agency (agencies) responsible for:		
State pre-kindergarten programs	☐	☒
Head Start programs	☐	☒
Programs that promote inclusion for children with special needs	☐	☒
Other (See guidance):	☐	☒

*** Required.**

For each box checked in Table 2.1.1, (a) identify the agency(ies) providing the service and **(b) describe** the consultation and coordination efforts**.** Descriptions must be provided for any consultation or coordination required by statute or regulation.

Representatives of local government *- Consults with the Job and Family Services Director's Association (JFSDA) Child Care Subcommittee. The JFSDA Child Care Subcommittee is composed of representatives from the CDJFS consisting of a cross section of program, fiscal and administrative staff. The purpose of the child care subcommittee is to discuss child care program issues, research issues relevant to child care and provide regular feedback on a variety of early care and education issues which potentially impact child care policy decisions at the local level.*

Other Federal, State, Local and Private agencies - *Coordinates with the Ohio Child Care Resource and Referral Association (OCCRRA) and the local Child Care Resource and Referral Agencies (CCR&R) on all statewide initiatives which include: T.E.A.C.H.; First Steps, Ohio's Infant Toddler Initiative; Step Up To Quality, Ohio's voluntary quality rating system; Out of School Time Project; and the Ohio Professional Development Network; coordinates with local early care and education quality improvement initiatives that support statewide initiatives such as United Way, foundations, community organizations and private agencies.*

Public Health *- Coordinate with the Ohio Department of Health on the following: State Early Childhood Comprehensive System Grant (SECCS), Help Me Grow, Healthy Child Care Ohio (HCCO), and revisions to health and safety provider curriculums as well as input into licensing regulations. Coordinate with the Ohio Department of Mental Health for the provision of Mental Health Consultation services to early care and education providers.*

Employment Service/ Workforce Development *- Coordinates with the Office of Families and Children, in the provision of TANF and subsidized child care.*

Public Education *- Coordinates with the Ohio Department of Education (ODE) on the Early Learning Initiative.*

TANF - *Coordinates the use of TANF funds to supplement a significant portion of the cost of Ohio's subsidized child care program direct services and purchased services.*

Indian Tribes *- Not applicable*

State Pre-K - *Coordinates with the Ohio Department of Education (ODE), Office of Early Learning & School Readiness to implement the Early Learning Program Guidelines which apply to public preschool as well as community-based programs (Child Care, Head start and Type A's) that participate in the Early Learning Initiative. Beginning 7/1/09 ODE licensed Early Learning Initiative programs are required to be Star Rated in the Step Up To Quality program.*

Head Start programs *- Coordinates with Head Start Programs in the provision of Early Learning Initiative services as well as with the Ohio Head Start Association on the implementation of licensing standards, professional development and Step Up To Quality, Ohio's quality rating system.*

Programs that Promote the Inclusion of Children with Special Needs - *Consults with the Help Me Grow Council (Part C of IDEA) as a participant and as a member of the subcommittee specific to inclusive care. Ohio received funding for Special Quest and coordinates and consults with that workgroup.*

Other Work Groups *- Coordinates with the Early Childhood Cabinet. The Cabinet was created through an Executive Order by the Governor to oversee the coordination and implementation of a single and comprehensive early care and education system; Consults with the Ohio Child Care Advisory Council (CCAC) which is composed of twenty-two members appointed by the director of ODJFS with the approval of the governor. Voting members meet monthly and represent child care centers, home providers, parents/guardians, advocacy agencies, CDJFS, and other child welfare professionals. The CCAC serves as advisors to ODJFS/BCCD planning and program activities and makes recommendations that support and inform child care policy; Consults with Groundworks a statewide advocacy organization; Consults and coordinates with the Ohio Afterschool Network (OAN) in the development of program quality guidelines and core knowledge and competencies, research on funding, dissemination and collection of information, capacity building and development of recommendations on licensing.*

2.1.2 Emergency Preparedness and Response Plan for Child Care and Early Childhood Programs. Lead Agencies are encouraged to develop an emergency preparedness and response plan for child care and other early childhood programs

operating in the State/Territory. The plan should include provisions for continuity of services and child care assistance payments to families and providers in the event of an emergency or disaster. Indicate which of the following best describes the current status of your efforts in this area. **Check only ONE.**

- ☐ **Planning**. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.
- ☐ **Developing.** A plan is being drafted. Include the plan as Attachment 2.1.2, if available.
- ☐ **Developed.** A plan has been written but has not yet been implemented. Include the plan as Attachment 2.1.2, if available.
- ☐ **Implementing.** A plan has been written and is now in the process of being implemented. The plan is included as Attachment 2.1.2.
- ☒ **Other. Describe:** *No efforts towards planning at the current time.*

a) Describe the progress made by the State/Territory in planning for an emergency or disaster event with regards to the operation of child care and early childhood education programs.

Currently there is no effort under way to develop a plan. BCCD recognizes the critical need to develop a plan and if staffing permits the goal would be to develop a plan over the next two years. The resources available by the Federal Child Care Bureau and NCCIC will be very useful when planning gets underway.

Recently ODJFS did collaborate with ODH and the development of a pandemic flu tool kit "Action Steps for Child Care" in response to the H1N1 outbreak.

b) Describe provisions the Lead Agency has in place for the continuation of core child care functions during and after a disaster or emergency.

N/A no plan developed yet.

c) Describe efforts the Lead Agency has undertaken to provide resources and information to families and child care providers about ways to plan and prepare for an emergency or disaster situation.

N/A no plan developed yet.

d) Describe how the Lead Agency is coordinating with other State/Territory agencies, private, and/or non-profit charitable organizations to ensure that child care and early childhood programs are included in planning, response, and recovery efforts.

N/A no plan developed yet.

2.1.3 Plan for Early Childhood Program Coordination. Lead Agencies are encouraged to develop a plan for coordination across early childhood programs. **Indicate** which of the following best describes the current status of your efforts in this area. **Note: Check only ONE.**

☒ **Planning**. Are there steps under way to develop a plan?

☒ Yes, and **describe** the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.

Planning efforts to create a new structure for early care and education that merges the Bureau of Child Care and Development, the Office of Early Learning and School Readiness and Help Me Grown (ODH) will begin once the state budget is finalized. Anticipated completion for the new center is July 1, 2010.

☐ No.

☐ **Developing**. A plan is being drafted. Include the draft as **Attachment 2.1.3** if available.

☐ **Developed**. A plan has been written but has not yet been implemented. Include the plan as **Attachment 2.1.3** if available.

☐ **Implementing**. A plan has been written and is now in the process of being implemented. Include the plan as **Attachment 2.1.3**.

☐ **Other (describe)**:

a) Describe the progress made by the State/Territory in planning for coordination across early childhood programs since the date of submission of the 2008-2009 State Plan.

The progress since the submission of the 2008-2009 State Plan is that the Governor through an Executive Order created the Early Childhood Cabinet. There is an Executive Director and membership includes the Directors of six state agencies. The Early Childhood Cabinet has created an Early Childhood Advisory Council that meets the requirements as set forth in the Head Start Reauthorization act.

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

The entity that is responsible for ensuring coordination is the Early Childhood Cabinet as stated above. The programs and/or funding streams that are coordinated are: Child Care, Public Education, Health, Mental Health and

TANF. The coordination supports two primary statewide initiatives: Step Up To Quality, Ohio's quality rating system and the Early Learning Initiative, a school readiness program serving low-income families.

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

The expected results of this coordination are many, particularly in light of the fact that by July of next year the goal is to combine the Bureau of Child Care and Development (ODJFS) and the Office of Early Learning and School Readiness (ODE) into one center. Currently, Ohio has early learning guidelines for birth to three and for three to five as well as program standards for each. One of the goals of the cabinet is to have a single set of early learning guidelines and a single set of program standards. Once this work is complete they should align to the standards in Step Up To Quality. The Ohio Professional Development Network is closely linked to the cabinet. Currently there are duplicate systems when it comes to professional development. As systems merge over the next year it is expected that professional development in our state will be more closely aligned. Finally, the goal of the cabinet and the merging of systems into a unified early care and education system is to support all children reaching their potential and therefore the achievement of positive outcomes.

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

The fact that there is an expectation in the State Plan to address coordination, supports continued coordination. An area not mentioned above but equally important is in the area of financing. Financing is also a goal to be addressed by the early childhood cabinet.

2.2 Public Hearing Process

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

a) Date(s) of notice of public hearing:
May 21, 2009

b) Manner of notifying the public about the public hearing:
Posted on Ohio Department of Job and Family Services website and sent out to stakeholder listservs

c) Date(s) of public hearing(s):
June 11, 2009 @1:00pm

d) Hearing site(s):

Ohio Department of Job and Family Services, 50 West Town Street, 6th Floor, Columbus Ohio 43215

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

The content of the plan was made available to the public one week before the public hearing utilizing the same notification procedure listed above.

f) **Attach** a brief summary of the public comment process as **Attachment 2.2**.

2.3 Public-Private Partnerships

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

☒ Yes. If yes, **describe** these activities or planned activities, including the results or expected results.

Public/Private Initiatives:

Early Learning Initiative (ELI)

The Early Learning Initiative was launched on July 20, 2005. ELI is an initiative aimed at meeting the full day full year needs of low income families while at the same time, meeting the school readiness needs of their children. There are several activities of ELI that are supported by public-private partnerships. These activities include: public awareness, business involvement, professional development, literacy, inclusion of children with disabilities, health, facility enhancement, local community leadership and welfare to work.

The expected results of ELI include: Greater coordination and alignment across early care and education programs; consistent implementation of Ohio's Early Learning Content Standards; and improved child outcomes as measured by Get it, Got it, Go!

Step Up To Quality (SUTQ)

Step Up To Quality, Ohio's voluntary quality rating system, is serving approximately 78,000 children in over 830 programs in 86 of Ohio's 88 counties. Beginning July 1, 2009, the Ohio Department of Education licensed Early Learning Initiative programs will be eligible to participate. There are several activities of SUTQ that are supported by public-private partnerships. These activities include: public awareness, business involvement, professional development, quality improvement, resource and referral services, literacy initiatives, facility enhancement, collaborative system building, local community leadership and provider recruitment.

The expected results of Step Up To Quality include: Increase the number of programs providing high quality early care and education services, increase parent knowledge of the benefits of high quality early care and

education and support program improvement through increased investment professional development.

First Steps Ohio's Infant Toddler Initiative
Delivered through the statewide system of child care resource and referral service agencies, providers serving infants and toddlers receive information about SUTQ, technical assistance to improve quality, access to libraries containing professional materials, assessments using the ITERS instrument and professional development. OCCRRA staff provide specialized-training development and train-the-trainer services, technical assistance, ITERS training and reliability checks, orientation for staff new to the work as well as ongoing training, timely information about relevant resources and research to CCR&R staff. The statewide Infant Toddler Coordinator who is housed at OCCRRA works to build the capacity of CCR&Rs to provide high-quality, high-value services to providers.

The expected results of First Steps include: increased number of higher-quality programs; improved outcomes for infants and toddlers; and increased knowledge, skill and professionalism of careteachers.

Afterschool Initiative (ASI)
Delivered through the statewide system of child care resource and referral service agencies, providers serving school-age children receive information about SUTQ, technical assistance to improve quality, access to libraries containing professional materials, assessments using the SACERS instrument and professional development. OCCRRA staff provide specialized-training development and train-the-trainer services, technical assistance, SACERS training and reliability checks, orientation for staff new to the work as well as ongoing training, timely information about relevant resources and research to CCR&R staff. OCCRRA afterschool staff build the capacity of CCR&Rs to provide high-quality, high-value services to providers. A new afterschool core knowledge and competencies document will used by OCCRRA to develop new trainings that will be delivered by the CCR&Rs and other organizations.

The expected results of ASI include: increased number of programs; higher-quality programs; increased access for families; improved outcomes for children and youth; and increased knowledge, skill and professionalism of providers.

Public/Private Task-forces:
Early Childhood Cabinet/Early Childhood Advisory Council
There are several activities that are supported by this task-force: public awareness, business involvement, professional development, quality improvement, literacy, inclusion of children with disabilities, health

initiatives, collaborative system building, local community leadership and welfare to work.

The expected results of the Early Childhood Cabinet/Early Childhood Advisory Council include: Implementation of a comprehensive and well-integrated early childhood system that provides early care and education opportunities in nurturing environments where children can learn what they need to succeed in school and life; comprehensive health services that meet children's vision, hearing, nutrition, behavioral, and oral health as well as medical health needs; early identification, assessment and appropriate services for children with special health care needs, disabilities or developmental delays; economic and parenting supports to ensure children have nurturing and stable relationships with caring adults.

Child Care Advisory Council (CCAC)
The CCAC is composed of twenty-two members appointed by the director of ODJFS with the approval of the governor. Voting members, who meet monthly, represent child care centers, home providers, parents/guardians, advocacy agencies, CDJFS, and other child welfare professionals. The ODJFS director, state superintendent of public instruction, the director of health, the director of commerce, the director of mental health, the director of mental retardation/developmental disabilities and the state fire marshal designees serve as non-voting members on the council. The CCAC serves as an advisor to ODJFS/BCCD in planning program activities and makes recommendations that support and promote child care policy. There are several activities that are supported by this task-force: public awareness, professional development, quality improvement, collaborative system building, local community leadership and provider recruitment.

The expected results are: Increased effectiveness in policy and program planning due to the recommendations of the council.

Ohio Professional Development Network (OPDN)
The Ohio Professional Development Network has two committees which are: Workforce Development and Quality Assurance. The professional development network meets quarterly. There are several activities that are supported by this task force: public awareness, professional development, collaborative system building and local community leadership.

The expected result of the Ohio Professional Development Network include: Development of a system to assist early care and education providers in all aspects of their professional growth.

Ohio Afterschool Network (OAN)
OAN works to increase the quality and availability of school-age, afterschool and summer programs through public awareness, research, policy recommendations, advocacy, development of tools to support quality, capacity-building of providers, bi-monthly communications that provide timely information, and on-line and in-person opportunities to build professional networks. OAN works closely with ODJFS and ODE to strengthen connections and alignment between providers that are regulated and funded by the two state agencies. OAN was funded by ODE to develop program quality guidelines which will be finalized in the summer of 2009 and will be used by providers, parents, funders, professional development and technical assistance providers, school districts, partnering agencies and others to assess and work toward high-quality programs. While not funded by ODJFS/CCDF, OAN works collaboratively with ASI to advance the quality and availability of school-age services.

The expected results of OAN include: increased number of programs, higher-quality programs, increased access for families, improved outcomes for children and youth, increased knowledge, skill and professionalism of providers.

Other Public/Private Partnerships:
Ohio Child Care Resource and Referral Association (OCCRRA)
OCCRRA coordinates in collaboration with the eight Resource and Referral agencies most of the functions (training and technical assistance, data collection) related to implementation of Ohio's statewide initiatives such as SUTQ, First Steps, Ohio's Infant Toddler Initiative, Afterschool Initiative, Healthy Child Care Ohio, Ohio Professional Development Network and T.E.A.C.H. There are several activities that are supported by OCCRRA: Public awareness, business involvement, professional development, quality improvement, resource and referral services, literacy, inclusion of children with disabilities, health initiatives, facility start-up and enhancement, collaborative system building, local community leadership and provider recruitment.

The expected results of OCCRRA include: Consistent implementation of statewide initiatives across the twelve service delivery areas.

Ohio Educational Television Stations (OETS):
Ohio Educational Television Stations provide professional development to primarily child care providers. They have a Ready to Learn Early series for children birth to three and a Ready to Learn series for children three to five. There are several activities that are supported by OETS: Public awareness, professional development, quality improvement, literacy and collaborative system building.

The expected results of OETS include: Increased standardization and alignment of professional development regardless of setting type.

☐ No.

PART 3
CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

3.1.1 Certificate Payment System. **Describe** the overall child care certificate process, including, at a minimum:

a) a description of the form(s) of the certificate (§98.16(k)):
Most CDJFS' in Ohio utilize contracts with child care providers for the provision of services. This gives the county agency organizational control over fiscal issues. However, all counties must offer a voucher, Certificate of Authorization for Payment of Publicly Funded Child Care Services (COAP) to parents if a provider they choose does not want to contract with the CDJFS. One exception to this is Cuyahoga County, which is the largest county in Ohio. This county uses COAPs exclusively. JFS 01140 ***Attachment 3.1***

b) a description of how the certificate permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))
Rule 5101:2-16-55describes the COAP(which is a voucher) as a benefit to the caretaker not the provider because the caretaker has the choice of providers that do not have a contract with the CDJFS. Once a caretaker is issued a COAP they will submit to the provider. The COAP must be submitted by the provider to the CDJFS for reimbursement purposes.

c) if the Lead Agency is also providing child care services through grants and contracts, **estimate** the proportion of §98.50 services available through certificates versus grants/contracts (this may be expressed in terms of dollars, number of slots, or percentages of services), and **explain** how the Lead Agency ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b)).
N/A

d) **Attach** a copy of your eligibility worker's manual, policy handbook, administrative rules or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1.**

Note: If these materials are available on the web, the Lead Agency may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

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

☐ Yes, and **describe** the type(s) of child care services available through the grant or contract, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

☒ No.

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

☒ Yes.

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

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

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

☒ No.

3.2 Payment Rates for the Provision of Child Care

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

3.2.1 Provide a copy of your payment rates as **Attachment 3.2.1**. The attached payment rates were or will be effective as of:
Attached the Appendix to Rule 5101:2-16-41.

3.2.2 Are the attached payment rates provided in Attachment 3.2.1 used in all parts of the State/Territory?

☒ Yes.

☐ No, and other payment rates and their effective date(s) are provided as **Attachment 3.2.2**.

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

a) The month and year when the local market rate survey(s) was completed (§98.43(b)(2)):
September 2008 (attached survey).

b) A copy of the **Market Rate Survey instrument** and a **summary of the results** of the survey are provided as **Attachment 3.2.3**. At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.
A copy of the Market Rate Survey instrument and a summary of the results of the survey are provided as Attachment 3.2B.

3.2.4 Does the Lead Agency use its **current** Market Rate Survey (a survey completed no earlier than 10/1/07) to set payment rates?

☐ Yes.

☒ No.

3.2.5 At what percentile of the current Market Rate Survey is the State payment rate ceiling set?
Ohio has continued with the maximum reimbursement ceiling rate set at the 65th Percentile of the 2006 Market Rate. These rates are an approximate equivalency to the 51.4 percentile of the 2008 Market Rate.

Note: If you do not use your current Market Rate Survey to set your rate ceilings or your percentile(s) varies across categories of care (e.g., type of setting, region, or age of children), **describe** and provide the range of variation in relation to your current survey.
The range and variation is used from the previous Market Rate Survey.

3.2.6 Describe the relationship between the attached payment rates and the market rates observed in the current survey, including at a minimum how payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey:
One way equal access has been assured in Ohio is by conducting a market rate survey every biennium and establishing rates for each provider type and child age group. During the review process of the most recent market rate survey, conducted by The Ohio State University, completed June 30, 2006, (See Attachment 3.2B), Final Report on the Analysis of the 2006 Ohio Child Care Market Rate Survey), the primary goal of the project was to develop reasonable estimates of the distribution of unsubsidized rates charged within well-defined service categories. In addition, a secondary goal was to identify, if they exist,

unique market areas within the state where the distributions of rates are both statistically and meaningfully different across the areas.

Six market categories were established. Market rates have been established at the sixty fifth (65th) percentile statewide for all provider types and age groups.

The validity of this approach is demonstrated by the following facts:

§ *Equal access does not guarantee entry, but an opportunity for the parent(s) to make a choice.*

§ *The child care provider is free to make appropriate business decisions regarding the delivery of services to subsidized families.*

§ *During State Fiscal Year 2008, approximately 4,300 licensed child care facilities provided services to approximately 71,000 subsidized children.*

§ *Ohio has approximately 11,000 certified family home child care providers. These homes are certified for a number of reasons, with the primary reason being the ability to accept payments for delivering services to approximately 25,000 subsidized families.*

§ *The State of Ohio does not maintain any statewide waiting lists for subsidized child care services.*
(§98.43(b))

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

☒ Yes. If, yes, **describe**.
Survey response rates covered most of the 88 counties, with a response rate of 52% for licensed providers and 28% of certified providers. CDJFS' must submit an Accessibility Plan, the ODJFS/BCCD does not have plans that indicate barriers to finding child care services for the families they serve.

☐ No.

3.2.8 Does the State have any type of tiered reimbursement or differential rates?

☒ Yes. If yes, **describe**:
There is a 5% increase for accreditation and/ or having a quality ratings, special needs and non-traditional care.

☐ No.

3.2.9 Describe how the Lead Agency ensures that payment rates do not exceed the amount paid by the general public for the same service.

The State of Ohio has Ohio Administrative Code language indicating that the reimbursement rate shall not exceed the providers customary charge to the public. (§98.43(a))

3.3 Eligibility Criteria for Child Care

3.3.1 Age Eligibility

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

☐ Yes. If yes, **define** physical and mental incapacity in Appendix 2, and **provide** the upper age limit _____

☒ No.

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

☐ Yes, and the upper age is _____

☒ No.
This service is provided to children up to age 18 and reimbursement is made through Ohio's Title XX program.

3.3.2 Income Eligibility

Complete columns (a) and (b) in Table 3.3.2 below based upon initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

Table 3.3.2 Income Eligibility

			IF APPLICABLE	
Family Size	**(a)** **100% of State Median Income (SMI) ($/month)**	**(b)** **85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]**	**Income Level if lower than 85% SMI**	
			(c) **$/month**	**(d)** **% of SMI** [Divide (d) by (a), multiply by 100]
1	*NA*	*NA*	NA	NA
2	*$4,027*	*$3,423*	*$2,334*	*58*
3	*$4,974*	*$4,228*	*$2,934*	*59*
4	*$5,922*	*$5,034*	*$3,534*	*60*
5	*$6,869*	*$5,839*	*$4,134*	*60*

Note: Table 3.3.2 should reflect maximum eligibility upon initial entry into the CCDF program.

a) Does the Lead Agency have "tiered eligibility" (i.e., a separate income limit for remaining eligible for the CCDF program)?

☐ Yes. If yes, **provide** the requested information from Table 3.3.2 and **describe**. . **Note:** This information can be included in a separate table, or by placing a "/" between the entry and exit levels in the above table.

☒ No.

b) If the Lead Agency does not use the SMI from the most current year, **indicate** the year used:
Ohio uses the current year.

c) These eligibility limits in column (c) became or will become effective on:
July 1, 2009

d) How does the Lead Agency define "income" for the purposes of eligibility? **Provide** the Lead Agencies definition of "income" for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))
Rule 5101:2-16-34 – located at the following location:
http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_CCM.htm%3ASRC%23%2F1%2F2%2F2%2F1%2F7%2F5%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(135956))&titleIndx=4&version=8.0.0

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

☒ Yes. If yes, **describe** what type of income is deducted or excluded from total family income.
Rule 5101:2-16-34 – located at the following location:
http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_CCM.htm%3ASRC%23%2F1%2F2%2F2%2F1%2F7%2F5%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(135956))&titleIndx=4&version=8.0.0

☐ No.

f) **Describe** whose income is excluded for purposes of eligibility determination.
Rule 5101:2-26-34 – located at the following location:
http://emanuals.odjfs.state.oh.us/emanuals/GetDocument.do?docLoc=C%3A%2Fodjfs%2FReady4Build%2F99_CCM.htm%3ASRC%23%2F1%2F2%2F2%2F1%2F7%2F5%2F1&locSource=input&docId=Document(storage%3DREPOSITORY%2CdocID%3D%23node-id(135956))&titleIndx=4&version=8.0.0

3.3.3 Work/Job Training or Educational Program Eligibility

a) How does the Lead Agency define "working" for the purposes of eligibility? **Describe** the specific activities that are considered "working" for purposes of eligibility determination, including minimum number of hours. (§§98.16(f)(6), 98.20(b))
Working is defined by paid employment or self employment.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program?

☒ Yes. If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? **Describe**, the specific activities that are considered "job training and/or educational program", including minimum number of hours. (§§98.16(f)(3), 98.20(b))
Training shall be related to gaining employment. Each CDJFS defines specific activities which are considered job training and or educational programs. There are no minimum number of hours.

☐ No.

3.3.4 Eligibility Based Upon Receiving or Needing to Receive Protective Services

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

☒ Yes. If yes, **provide** a definition of "protective services" in Appendix 2. Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☒ Yes.

☐ No.

☐ No.

b) Does the Lead Agency provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))

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

☒ No.

3.3.5 Additional Conditions for Determining CCDF Eligibility

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

☐ Yes, and the additional eligibility conditions are: (Terms must be defined in Appendix 2)

☒ No.

3.4 Priorities for Serving Children and Families

3.4.1 At a minimum, CCDF requires Lead Agencies to give priority for child care services to children with special needs, or in families with very low incomes. **Complete** Table 3.4.1 below regarding eligibility priority rules. For columns (a) through (c), **check** only one box if reply is "Yes". Leave blank if "No". **Complete** column (e) only if you check column (d).

Table 3.4.1 Priorities for Serving Children

	How does the Lead Agency prioritize the eligibility categories in Column 1? **CHECK ONLY ONE**			**CHECK ONLY IF APPLICABLE**	
Eligibility Categories	(a) Priority over other CCDF-eligible families	(b) Same priority as other CCDF-eligible families	(c) Guaranteed subsidy eligibility	(d) Is there a time limit on the priority or guarantee?	(e) How long is time limit?
Children with special needs*	☐	☒	☐	☐	
Children in families with very low incomes*	☐	☒	☐	☐	
Families receiving Temporary Assistance for Needy Families (TANF)	☒	☐	☐	☐	
Families transitioning from TANF	☐	☐	☐	☒	12 months
Families at risk of becoming dependent on TANF	☐	☐	☒	☐	

*** Required**

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

(a) children with special needs are eligible if caretakers meet the work/training/education activity and income requirements.

(b) children in families with very low incomes are eligible if caretakers meet the work/training/education activity and income requirements in the same manner as all children.

(c) Other – protective child care is determined regardless of work/training/education activity and does consider the income requirement.

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

(a) families receiving TANF are guaranteed child care benefits
(b) families transitioning off TANF are guaranteed child care benefits for 12 months
(c) families at risk of becoming dependent on TANF are eligible if caretakers meet the work/training/education activity and income requirements.

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

☐ Yes, and the additional priority rules are: (**Terms must be listed and defined in Appendix 2**)

☒ No.

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

☒ Yes.

☐ No.

3.4.6 Does the Lead Agency have a waiting list of eligible families that they are unable to serve?

☐ Yes. If yes, **describe**. At a minimum, the description should indicate:

a) Whether the waiting list is maintained for all eligible families or for certain populations?

b) Whether the waiting list is maintained for the entire State/Territory or for individual localities?

c) What methods are employed to keep the list current?

☒ No.

3.5 Sliding Fee Scale for Child Care Services

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

a) **Attach** the sliding fee scale as **Attachment 3.5.1.**
This attachment displays monthly income ranges for families, based on the federal poverty levels and association co-payment assignments. Ohio Administrative Code (OAC) Rule 5101:2-16-39, Appendix A. The attached fee scale was effective as of 2/2007.

b) **Describe** how the sliding fee scale is administered, including how the family's contribution is determined and how the co-payment is assessed and collected:
The slide fee scale is applied to the family based on their monthly countable income. The fee shall not exceed 10% of the family's monthly income. The fee is to be paid to the provider in full each month not to exceed the cost of care.

c) The attached sliding fee scale was or will be effective as of *7.1.2008*

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

☐ Yes, and **describe** those additional factors:

☒ No.

3.5.2 Is the sliding fee scale provided as Attachment 3.5.1 used in all parts of the State? (658E(c)(3)(B))

☒ Yes.

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

3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is:
Families with a monthly income less than $10.

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

☐ ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.

☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.

☒ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. **Describe** these families:
The CDJFS may waive fees on a case by case basis for families eligible for protective child care benefits.

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

☐ Yes.

☒ No.

3.5.5 Describe how the co-payments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

Using the 2009 federal poverty level (FPL), Ohio's sliding fee table is based exclusively on family size and income. The fee is calculated on a graduated percentage of family income, and is kept affordable by capping the fee at no more than 10% of the family's monthly income regardless of provider type and the actual cost of care.

PART 4
PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

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

a) How parents are informed of the availability of child care services under CCDF (i.e., parental choice of child care services through a certificate or grant of contract)

Parents are informed of the Child Care Program through county-issued information as well as ODJFS/BCCD-issued child care informational materials and related websites. http://jfs.ohio.gov/CDC/childcare.stm Families are informed of their child care options through the eligibility process. In addition, ODJFS/BCCD has established a statewide CCR&R services system for the purpose of providing families with information regarding the availability of child care benefits.

b) How parents can apply for CCDF services

The application process for child care assistance is administered by Ohio's 88 CDJFS who determine eligibility and contract with providers or other non-profit entities, i.e., CCR&R agencies. CDJFS, in addition, are responsible for ensuring the accessibility of the application process to include location of applications and accessibility in non-traditional sites and during non-traditional times. These accessibility plans are on the file with ODJFS/BCCD.

c) What documentation parents provide as part of their application to determine eligibility

Ohio Administrative Code (OAC) Rule 5101:2-16-30, 5101:2-16-34 and 5101:2-16-35.
http://emanuals.odjfs.state.oh.us/emanuals

d) How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4

Parents who receive TANF benefits are informed about exceptions to individual penalties by the CDJFS during eligibility determination.

e) What steps the Lead Agency has taken to reduce barriers to initial and continuing eligibility for child care subsidies

The CDJFS is responsible for administering the application process to include reducing barriers. Eligibility is determined every 12 months and does not require a face-to-face interview. ODJFS maintains a website with a fillable/printable application. The CCR&Rs and some community locations such as child care facilities and job search centers provide applications. Applications, along with

any documentation, can be mailed without the requirement of hand delivery. There is also an E-Gateway to expedite the application process.

f) **Attach** a copy of your parent application for the child care subsidy program as **Attachment 4.1.1**.

4.1.2 Is the application process different for families receiving TANF?

☐ Yes, and **describe** how the process is different:

☒ No.

4.1.3 What is the length of eligibility period upon initial authorization of CCDF services?
12 Months

a) Is the initial authorization for eligibility the same for all CCDF eligible families?

☒ Yes.

☐ No and **describe** any variations that relate to the services provided (e.g., through collaborations with Head Start or pre-kindergarten programs or differences for TANF families):

4.1.4 Describe how the Lead Agency ensures that parents are informed about their ability to choose from among family child care and group home child care, center-based care and in-home care, including faith-based providers in each of these categories.
ODJFS/BCCD maintains a website that provides information regarding: child care assistance; types of child care; how to recognize quality child care; how to apply for assistance, linkages to the CCR&Rs and other resources. ODJFS/BCCD continues to purchase and distribute education materials.

4.1.5 Describe how the Lead Agency reaches out and provides services to eligible families with limited English proficiency, including how the Lead Agency overcomes language barriers with families and providers.
CDJFS include within their accessibility plans ways to reach out to families with limited English proficiency. This might include considerations for migrant families, interpreters, translated materials and presentations at local events. Currently, the child care application is available in Spanish.

4.2 Records of Parental Complaints

Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

OAC Rules 5101:2-12-08 and 5101:2-13-08 state that the director of ODJFS shall complete a disposition report for each licensed child care facility complaint at the conclusion of the investigation. This report shall be kept on file at ODJFS/BCCD and a copy of the complaint, with confidential information redacted, shall be provided to any person who submits a request to the director (lead agency's administrator).

Additionally, ODJFS/BCCD maintains a website offering access to information regarding substantiated complaint investigations on licensed facilities. Complaint investigation reports are posted for the current licensure period only.

Complaints regarding Type B home providers and in-home aides providing child care in the child's home, are investigated by the CDJFS. OAC Rule 5101:2-14-03 specifies the investigation requirements for such complaints.

4.3 Unlimited Access to Children in Child Care Settings

Provide a detailed description of the Lead Agency procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))
ORC 5104.011 states that parents and legal custodians are to be permitted unlimited access to facilities during hours of operation for purposes of contacting their children, evaluating the care provided by the center, evaluating the premises of the center, or for other purposes approved by the director of job and family services.

OAC Rule 5101:2-12-30 cites this requirement for child care centers, 5101:2-13-30 cites this requirement for Type A homes, and 5101:2-18-19 cites this requirement for day camps.

OAC Rule 5101:2-14-24 states that Type B home providers and the parent will complete a written agreement that includes the statement that the parent has unlimited access to all areas where child care is provided during hours of operation.

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

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

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

NOTE: The TANF agency, not the Child Care Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. The TANF agency that established these criteria or definitions is:

- "appropriate child care":
  Availability of a licensed or certified child care provider.

- "reasonable distance":
  Reasonable distance is defined by each individual county department of job and family services and is based on availability of transportation.

- "unsuitability of informal child care":
  This is a determination by the parent or a child protective service agency based on findings during an investigation of an abuse or neglect compliant.

- "affordable child care arrangements":
  All OWF/TANF participants are guaranteed eligibility for child care subsidy with co-payments based on family size and income.

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

5.1 Quality Targeted Funds and Set-Asides

Federal appropriations law has targeted portions of the CCDF for quality improvement and for services for infants and toddlers, child care resource and referral (CCR&R) and school-age child care. For each targeted fund, provide the following information.

5.1.1 Infants and Toddlers:

Note: For the infant and toddler targeted funds, the Lead Agency must **provide** the maximum age of a child who may be served with such targeted funds (not to exceed 36 months).

a) **Describe** the activities provided with these targeted funds
Activities provided with these targeted funds for children up to 36 months of age include: Support Infant Toddler Specialist network. development and dissemination of training for infant toddler care teachers, assess program quality, mentoring to programs participating in Step Up To Quality to improve licensing compliance and quality, mental health consultation.

b) **Identify** the entities providing the activities
The entities providing these activities in collaboration with BCCD include: The Ohio Child Care Resource and Referral Association (OCCRRA), the eight Child Care Resource and Referral Agencies and Healthy Child Care Ohio (training); OCCRRA and CCR&R (assessments and mentoring) and Department of Mental Health (mental health consultation).

c) **Describe** the expected results of the activities.
The expected results include: Programs serving infants and toddlers will be safe, healthy and of sufficient quality to support their optimal development; care teachers working with infants and toddlers will have the knowledge and skills necessary to support their optimal development and have access to enhanced services for infants and toddlers with special health/developmental needs.

5.1.2 Resource and Referral Services:

a) **Describe** the activities provided with these targeted funds
Over the past year BCCD contracted with ICF International to assist in the development of a new Request for Grant Application for the provision of child care resource and referral services. As a result of this process several key

changes have been made which include: identifying the amount of funding/effort that can be applied to their three lines of service (providers, families and communities) as well as identifying two levels of service, foundational and targeted. Activities provided with these funds include: training, technical assistance, parent referral services, consumer education, data collection and analysis, local systems building efforts and quality improvement.

b) **Identify** the entities providing the activities
The entities providing these activities in collaboration with BCCD include: The Ohio Child Care Resource and Referral Association and the agencies that serve the twelve Child Care Resource and Referral service delivery areas.

c) **Describe** the expected results of the activities.
The expected results include: Increased effectiveness at the local level that is aligned to the states' goals and priorities and increased flexibility to utilize funding that best meets the needs at the local level. In addition, the focus on quality improvement, primarily through Step Up To Quality, will increase the number of programs that meet higher standards.

5.1.3 School-Age Child Care:

a) **Describe** the activities provided with these targeted funds
Activities provided with these targeted funds include: Support of Afterschool Specialists, development and dissemination of training, assess program quality and mentoring to programs participating in Step Up To Quality to improve licensing compliance and quality and the development and dissemination of Afterschool Program Guidelines and Core Knowledge and Competencies for Afterschool Professionals.

b) **Identify** the entities providing the activities
The entities providing these activities in collaboration with BCCD include: The Ohio Child Care Resource and Referral Association and the eight Child Care Resource and Referral agencies and the Ohio Afterschool Network.

c) **Describe** the expected results of the activities.
The expected results include: Programs serving schoolagers will be safe, healthy and of sufficient quality to support their development and individuals working with schoolagers will have the knowledge and skills they need to support their optimal development.

5.1.4 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including targeted funds) during the 1-year period: October 1, 2009 through September 30, 2010:

$37,000,000.00 (11 %)

5.1.5 Check each activity in Table 5.1.5 that the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the targeted funds for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h)). **CHECK ALL THAT APPLY.**

Table 5.1.5 Activities to Improve the Availability and Quality of Child Care

Activity	Check if undertaking/ will undertake	Name and type of entity providing activity	Check if non-governmental entity
Comprehensive consumer education	☒	OCCRRA, CCR&R	☒
Grants or loans to providers to assist in meeting State and local standards	☒	OCCRRA	☒
Monitoring compliance with licensing and regulatory requirements	☒	ODJFS	☐
Professional development, including training, education, and technical assistance	☒	OCCRRA, CCR&R, ODE/ODJFS/ODMH/ODH	☒
Improving salaries and other compensation for child care providers	☒	OCCRRA	☒
Activities to support a Quality Rating System	☒	OCCRRA, CCR&R	☒
Activities in support of early language, literacy, pre-reading, and early math concepts development	☒	ODE, OCCRRA, CCR&R	☒
Activities to promote inclusive child care	☒	OCCRRA, CCR&R	☒
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children	☒	OCCRRA, CCR&R ODE/ODJFS/ODH/ODMH	☒

Activity	Check if undertaking/ will undertake	Name and type of entity providing activity	Check if non-governmental entity
Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))	☒	OCCRRA, CCR&R	☒

5.1.6 For each activity checked in Table 5.1.5, a) **describe** the expected results of the activity. b) If you have conducted an evaluation of this activity, **describe the results**. If you have not conducted an evaluation, **describe** how you will evaluate the activities.

Comprehensive consumer education:
ODJFS/BCCD *maintains a website that provides information regarding: child care assistance; types of child care; how to locate child care, licensing compliance, information about Step Up To Quality, how to recognize quality child care; how to apply for assistance, linkages to the CCR&Rs and other resources. In addition there is an RSS feed that individuals can sign up for to receive alerts about important information.* ***OCCRRA and the CCR&R's*** *have information on statewide initiatives as well as local updates.*

Expected results: Assist families in making more informed child care choices on behalf of their children; support providers in accessing current and consistent information; and keep stakeholders abreast of what's happening across the state.

Will be evaluated by: A satisfaction survey will be conducted.

Grants or loans to providers to assist in meeting State and local standards:
OCCRRA *administers the Quality Achievement Awards that provide funding to Step Up To Quality programs.*

Expected results: Improve facilities, classroom quality, support for early care and education professionals and support children's development and learning.

Evaluation method: Audits are conducted to verify the utilization of the awards for their intended purpose.

Monitoring compliance with licensing and regulatory requirements:
ODJFS/BCCD *licenses approximately 4,300 Head Start centers, child care centers and Type A child care homes, in which licensing specialists make at least 2 inspections per year. Currently, licensing specialists use computers during monitoring visits to expedite the monitoring/reporting process. An annual report is published detailing significant statistics; in addition, centers and certified homes are required to submit incident/injury reports. A licensing compliance threshold has*

been developed, called Serious Risk Noncompliances, these noncompliances are the threshold for entry into Step Up To Quality and are the basis for consequences to a program's Star rating.

Expected results: Keep children safe and healthy and link regulation to other systems such as quality and school readiness.

Evaluation ongoing: Periodic review of licensing data to asses consistent monitoring of licensing regulations.

Professional development, including training, education and technical assistance:
***ODJFS/BCCD** - provides training to all new center directors on the licensing rules, serious risk non-compliances, new curriculum such as transportation and new employee orientation, new rules and interpretive guidance and Step Up To Quality. Technical assistance is provided to programs by Licensing Specialists and Step Up To Quality Licensing Specialists as well other bureau staff.*
***OCCRRA & CCR&R's** - Manages the Infant Toddler Specialists and School Age Specialists who provide training an on-site technical assistance. In addition they provide specialized training for Step Up To Quality, assistance on T.E.A.C.H., quality achievement awards and the professional development registry.*
***ODE** - Manages the Literacy Specialists who provide CORE and SIRI training utilizes Consultants who provide on-site technical assistance to ELI programs.*
***ODH** - Provides funding to OCCRRA for Healthy Child Care Nurses.*
***ODMH** - Manages the work of Mental Health Consultants who provide training and on-site technical assistance*

Expected results: Support and strengthen the knowledge, skills and abilities of early care and education professionals.

Will be evaluated by: Training and technical assistance will be evaluated utilizing a standardized instrument.

Improving salaries and other compensation for child care providers
***OCCRRA** administers T.E.A.C.H. which supports the improvement of salaries as every scholarship has either a bonus or raise attached to educational accomplishments. There is a formalized professional development systems committee that has, as one of its areas of focus, a compensation and retention workgroup.*

Expected results: Assist in the retention of highly qualified early care and education professionals.

Evaluation ongoing: T.E.A.C.H. Advisory Board meets quarterly to asses T.E.A.C.H. data.

Activities to support a Quality Rating System:
ODJFS *- responsible for the oversight of the rating system - but coordinates the infrastructure supports with* ***OCCRRA*** *and the* ***CCR&R's.*** *These supports include training, technical assistance, data collection, professional registry, quality achievement awards and T.E.A.C.H.*

Expected results: Increase the number of quality programs.

Evaluation method: The Ohio State University conducts annual research utilizing surveys, questionnaires and program and child assessments. A leadership team meets monthly and key stakeholders meet quarterly to inform continuous improvement.

Activities in support of early language, literacy, pre-reading, and early math concepts and development:
ODE *- Manages the Literacy Specialists, provides professional development related to the content standards, oversees the program guidelines for ELI which require the implementation of Ohio's Early Learning Content Standards. ODE contracts with QNet, who has coordinated content standards professional development across the state.*
OCCRRA and CCR&R's - *Develop and provide pre-requisite and specialized training on the content standards as it is a requirement of Step Up To Quality.*

Expected results: Support children's early development and learning so they enter kindergarten ready to succeed.

Evaluation method: An evaluation was conducted by Learning Points which assessed ELI programs using the ELLCO.

Activities to promote inclusive child care:
ODJFS/BCCD *collaborates with the ODH - Help Me Grow Council (Part C of IDEA) as a participant and as a member of the subcommittee specific to inclusive care. Technical assistance is provided to counties and providers to ensure awareness of new rules and ability to access additional resources if needed. ODJFS/BCCD continues to collaborate with both departments of health and mental health regarding the special needs of children. SpecialQuest, Ohio is one of 10 states that were selected to create a State Leadership Team to participate in the SpecialQuest Birth - Five project. The grant (provides technical assistance for three years) is funded by the Office of Head Start and administered by the Nappa County Office of Education in collaboration with the Frank Porter Graham Child Development Institute at UNC, Chapel Hill. The goal of SpecialQuest Birth - Five is to create a plan for implementing cross-systems early childhood professional development for inclusion by incorporating the Special Quest approach and materials into the state professional development. The project provides SpecialQuest materials and resources and has an on-line multi-media training library.*

Visit www.specialquest.org (http://www.specialquest.org/)for more information.

Expected results: Support vulnerable children and their families through outreach and assist in removing barriers to high quality care.

Will be evaluated by: Evaluations will be conducted at the conclusion of each training session. Results will be analyzed at the state level and revisions made as necessary.

Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children:
ODJFS/BCCD - *Provides funding to* ***ODH*** *for HCCO nurses.* ***OCCRRA*** *administers the program for ODH. The HCCO consultants offer training on both the ASQ and ASQ:SE. They also provide free vision and hearing screenings as well as training on specific health and safety topics such as handwashing, obesity prevention, medication administration, SIDS risk reduction, allergies, and caring for children with special needs.*

OCCRRA & CCR&R's - *Developed and provided professional development on social and emotional development. Brought in CSEFL for Infants and Toddlers and trained staff to utilize their curriculum when working with programs. Social and Emotional core competencies were developed this past year.*
ODMH - *Manages the Mental Health Consultants who provide training and on-site technical assistance.*

Expected results: Improve the physical, emotional and social health of young children in order to support their optimal development.

Evaluation ongoing: The Mental Health Consultant Network has an evaluation component which assesses how services are utilized and the results of that utilization.

Other quality activities that increase parental choice, and improve the quality and availability of child care:
ELI which is co-administered by ODE and ODJFS provides another option for parents. The Ohio Parent Information Network is a website dedicated to announcing and disseminating new resources of interest to parents. The County Departments of Job and Family Services receive a portion of BCCD's quality dollars to improve the quality and availability of child care.

Expected results: Local quality efforts will link to state quality initiatives.

Evaluation: There are no evaluation plans at this time.

5.2 Early Learning Guidelines and Professional Development Plans

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

☐ **Planning**. The State is planning for the development of early learning guidelines. Expected date of plan completion: _____If possible, respond to questions 5.2.2 through 5.2.4.

☐ **Developing**. The State is in the process of developing early learning guidelines. Expected date of completion: _____If possible, respond to questions 5.2.2 through 5.2.4.

☐ **Developed**. The State has approved the early learning guidelines, but has not yet developed or initiated an implementation plan. The early learning guidelines are included as **Attachment 5.2.1, if available**.

☒ **Implementing**. In addition to having developed early learning guidelines, the State has embarked on implementation efforts which may include dissemination, training or embedding guidelines in the professional development system. The guidelines are included as **Attachment 5.2.1**.

☐ **Revising**. The State has previously developed early learning guidelines and is now revising those guidelines. The guidelines are included as **Attachment 5.2.1**.

☐ **Other. Describe**:

a) Describe the progress made by the State/Territory in developing, implementing, or revising early learning guidelines for early learning since the date of submission of the 2008-2009 State Plan. Efforts to develop early learning guidelines for children birth to three or older than five may be described here.
Plans are underway to revise during the next year.

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

☒ Yes. If yes, **identify standards:**
Ohio's Infant Toddler Guidelines and Ohio's K-12 Content Standards.

☐ No.

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

☐ Yes. If yes, **describe:**

☒ No.
Publishers have aligned their curricula to the standards.

d) Have guidelines been developed for children in the following age groups:

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

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):
Birth to three- *http://jfs.ohio.gov/cdc/InfantToddler.pdf*

Three to five- *Early Learning Content Standards*
A framework for creating learning experiences and teaching strategies to meet the needs of all children
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=24093

K-12.- *As to the general Content Standards*
http://education.ohio.gov/GD/Templates/Pages/ODE/ODEPrimary.aspx?page=2&TopicID=1705&TopicRelationID=1696

You can then choose from:
Fine Arts – K-12
Information about the arts and the Fine Arts Academic Content Standards
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=787

Social Studies – K-12
Information about social studies and the Social Studies Academic Content Standards
http://www.ode.state.oh.us/GD/Templates/Pages/ODE/ODEPrimary.aspx?page=2&TopicRelationID=1706

English Language Arts – K-12
Information about reading and writing and the English Language Arts Academic Content Standards
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=786

Foreign Languages – K-12
Information about languages used in other countries and the Foreign Language Academic Content Standards
http://education.ohio.gov/GD/Templates/Pages/ODE/ODEPrimary.aspx?Page=2&TopicID=1696&TopicRelationID=1701

Mathematics – K-12
Information about mathematics and the Mathematics Academic Content Standards
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=791

Science – K-12
Information about science and the Science Academic Content Standards
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=733

Technology – K-12
Information about various electronic- and computer-based technologies and the Technology Academic Content Standards
http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=793

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

☒ Yes.

☐ No.

a) Do the guidelines for children three-to-five-year-olds address other domains such as social/emotional, cognitive, physical, health, or creative arts?

☒ Yes. If yes, **describe**.
Ohio has content standards in Social Studies and Science.

☐ No.

5.2.3 Implementation of Voluntary Early Learning Guidelines.

a) **Indicate** which strategies the State used, or expects to use, in implementing its early learning guidelines.

Check all that apply:
☒ Disseminating materials to practitioners and families
☒ Developing training curricula

☒ Partnering with other training entities to deliver training
☒ Aligning early learning guidelines with licensing, core competencies, and/or quality rating systems
☐ Other. **Describe**:

b) **Indicate** which stakeholders are, or are expected to, actively support(ing) the implementation of early learning guidelines:

Check all that apply:
☐ Publicly funded (or subsidized) child care
☒ Head Start
☒ Education/Public pre-k
☐ Early Intervention
☒ Child Care Resource and Referral
☒ Higher Education
☐ Parent Associations
☐ Other. **Describe**:

c) **Indicate** the programs that mandate or require the use of early learning guidelines
☒ Publicly funded (or subsidized) child care
☐ Head Start
☒ Education/Public pre-k
☐ Early Intervention
☐ Child Care Resource and Referral
☐ Higher Education
☐ Parent Associations
☒ Other. **Describe**: Step Up To Quality (SUTQ)

d) **Describe** how cultural, linguistic and individual variations are (or will be) acknowledged in implementation.
The Early Learning Content Standards were developed to be inclusive of cultural, linguistic and individual variations.

e) Describe how the diversity of child care settings is (or will be) acknowledged in implementation.
The Early Learning Contents Standards were developed to be appropriate for all children regardless of setting.

Materials developed to support implementation of the guidelines are included as **Attachment 5.2.3**. If these are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

1. *Parent CD's*
   http://education.ohio.gov/GD/Templates/Pages/ODE/ODEDetail.aspx?page=3&TopicRelationID=1384&ContentID=26736&Content=63720

2. *Implementation Guide*
   http://www.ode.state.oh.us/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=24194
3. *Literacy Tool Kits*
   http://www.brookespublishing.com/store/books/smith-ellco/index.htm
4. *CORE – Preschool Literacy Training*
   http://www.ecqnet.org/ecq/ProfDev/literacyCORE/index.cfm
5. *SIRI*
   http://www.ecqnet.org/ecq/ProfDev/SIRI/index.cfm
6. *Curriculum Alignment Tools*
   http://education.ohio.gov/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=24198 or
   http://education.ohio.gov/GD/DocumentManagement/DocumentDownload.aspx?DocumentID=24199

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

a) Validating the content of the early learning guidelines
The following describes the construct validation process used by Ohio Department of Education for the Early Learning Content Standards. In response to Amended Substitute House Bill 94 of 2001, the ODE's Office of Early Learning and School Readiness and the Office of Curriculum and Instruction collaborated to convene Ohio stakeholders to develop early learning content standards for English language arts, mathematics, social studies and science. The early learning content standards describe essential concepts and skills for young children. Based on research, these achievable indicators emerge as the result of quality early learning experiences regardless of the setting (e.g., nursery school, preschool, family care, etc.). In addition, the early learning content indicators are aligned to the K-12 indicators, benchmarks and standards that result in a seamless educational framework for children pre-kindergarten through kindergarten and primary grades. Membership of the writing teams for the development of the content indicators was selected from a pool of nominees representing Ohio's early childhood stakeholders. They included Head Start; public and private preschool teachers; kindergarten teachers; program administrators and faculty members from higher education teacher preparation institutions. The team was balanced to include representation from geographic areas of the state, as well as ethnic diversity. A draft of the early learning content standards for the four content areas was disseminated for review and focused feedback from experts within and outside of Ohio. It also was posted on the ODE Web site for broad public input. Final revisions to the early learning content standards were made based on feedback from the field. These early learning standards serve as a framework for designing and implementing meaningful curricula and intentional learning experiences within all preschool and child care settings. The early learning standards are the expectations for the end of the preschool

years and thus serve as a guide for parents and provide the foundation for professional development.

b) Assessing the effectiveness and/or implementation of the guidelines
ODE's Office of Early Learning and School Readiness have two key mechanisms for assessing the effectiveness and/or implementation of the early learning content standards: 1) Early Language and Literacy Classroom Observation (ELLCO) and 2) an external evaluation.

ODE utilizes the Early Language and Literacy Classroom Observation instrument (ELLCO), in its state funded programs to:

Inform quality assurance as part of state funded early learning programs.
Provide teachers and administrators with information to improve program quality.
Identify professional development needs of teachers.
Provide direction to program administration as to the allocation of resources.
Ascertain the quality of early learning experiences

The ELLCO is a tool designed to gather data and develop profiles of classroom instruction and environment. It was selected because it provides an overall view of effective practice with particular emphasis on language and literacy, identifies the critical features of early literacy learning and is grounded in the research on emergent and early literacy development. The ELLCO is conducted by two trained independent observers in a 25 percent stratified random sample of classrooms implementing the Early Learning Initiative. ODE plans to expand the use of ELLCO in its other state funded programs including Early Childhood Education (formerly public preschool) and Preschool Special Education.

In addition to the ELLCO, a two-year comprehensive external program evaluation is being conducted for the state funded Early Learning Initiative to determine program effectiveness with regard to implementation of the Early Learning Content Standards and Program Guidelines.

c) Assessing the progress of children using measures aligned with the guidelines
All children attending state-funded preschool programs, including Early Childhood Education (ECE, formerly public preschool), Early Learning Initiative (ELI), and Preschool Special Education programs are required to participate in the Get It, Got It, Go! (GGG) assessment. Programs are required to report the results of the GGG assessment in the fall and in the spring. GGG is a quick, efficient and repeatable tool that is useful to measure children's progress in critical language and early literacy indicators. These individual growth and development indicators (IGDIs) include: picture naming, rhyming and alliteration. The information gathered through the

administration of GGG is used for two purposes. The first is to supply the ELSR with aggregated information to track program progress. The second purpose, and the one that directly impacts student progress, is to inform and individualize instruction.

In kindergarten, the Kindergarten Readiness Assessment—Literacy (KRA-L) is designed to assist educators in the evaluation of young children's literacy skills at the beginning of the kindergarten year. The KRA-L measures six elements or essential indicators of success: answering questions, sentence repetition, rhyming identification and rhyming production, letter identification and initial sounds. The KRA-L may not be used to determine entrance or placement in kindergarten. Students receive a composite score (on a scale from 0-29) which is reported to ODE. The composite scores may fall within three score bands. Each of the score bands has been designed to guide decisions about further assessment and instruction for individual children and groups of children. The composite score bands are as follows: Band 1: 0-13 Assess broadly for intense instruction; Band 2 14-23 Assess for targeted instruction; Band 3: 24-29 Assess for enriched instruction.

d) Aligning the guidelines with accountability initiatives

ODE's Office of Early Learning and School Readiness are in the process of identifying statewide and regional benchmarks for the GGG and KRA-L. ODE will document annual progress on these assessments statewide as well as by demographic characteristics. In addition, cohort analyses will be conducted to examine performance on the GGG, KRA-L, and third grade statewide assessment to understand the potential impact of preschool experience on later school performance.

Chart 1: Total Score Mean ELLCO Classroom Observation Ratings for Early Learning Initiative Classrooms Over Time

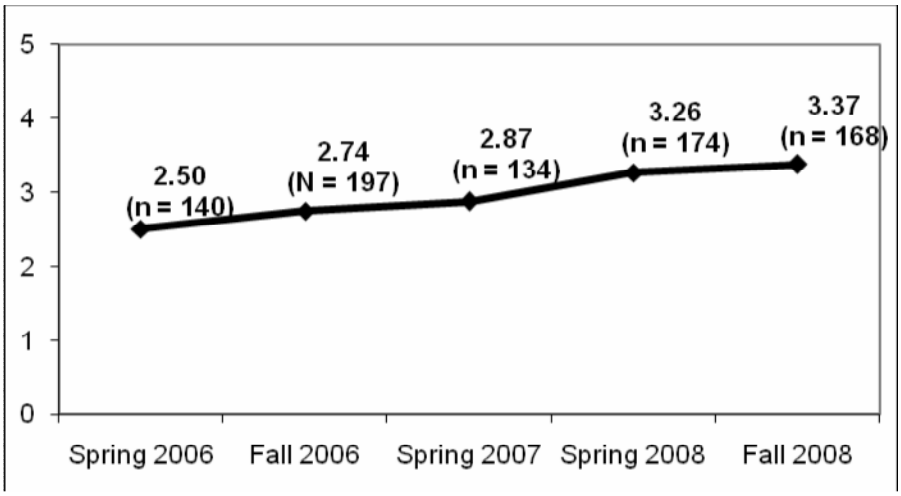

Table 1: Early Learning Initiative (ELI) Get It , Got It, Go! Results Fiscal Years 2006, 2007, 2008

Table 1.a: ELI Basic descriptive statistics for Picture Naming

Test Time	Number tested	Mean	Std. Dev.
Fall 05	3076	17.08	7.20
Spring 06	3076	21.46	7.62
Fall 06	5363	17.69	7.45
Spring 07	5363	21.22	7.74
Fall 07	6974	18.00	7.61
Spring 08	6974	20.60	7.48

Table 1.b: ELI Basic descriptive statistics for Rhyming

Test Time	Number tested	Mean	Std. Dev.
Fall 05	1872	4.17	4.23
Spring 06	1872	7.20	5.75
Fall 06	3107	4.48	4.49
Spring 07	3107	7.24	5.70
Fall 07	3827	4.95	4.70
Spring 08	3827	7.39	5.78

Table 1c: ELI Basic descriptive statistics for Alliteration

Test Time	Number tested	Mean	Std. Dev.
Fall 05	1593	2.81	3.34
Spring 06	1593	4.48	4.33
Fall 06	2681	3.05	3.38
Spring 07	2681	4.44	4.08
Fall 07	3111	3.17	3.49
Spring 08	3111	4.59	4.14

Data Notes:
1. Data include only ELI children with both a pre (fall) and a post (spring) score within each academic year.
2. Data exclude ELI contracted agencies that report GGG data in ODE's Education Management Information System (EMIS).

Table 2: Summary of State Level Results for Kindergarten Readiness Assessment Literacy (KRAL)

Test Administration Year	**Number of K Children with Valid KRAL Score**	**Mean Composite Score**	**Percentage and Number of K Children within each KRAL Composite Score Band**		
			Band 1 (Composite	**Band 2 (Composite**	**Band 3 (Composite**

			Scores 0-13)	Scores 14-23)	Scores 24-29)
Fall 2005	124,862	19.60	21.59% (26,959)	41.56% (51,886)	36.85% (46,017)
Fall 2006	123,880	19.60	22.22% (27,524)	40.91% (50,686)	36.87% (45,670)
Fall 2007	122,786	19.73	21.82% (26,789)	40.61% (49,869)	37.57% (46,128)

Band Definitions
Each of the bands guides decisions about further assessment and instruction.
Band 1 – Assess broadly for intense instruction
Band 2 – Assess for targeted instruction
Band 3 – Assess for enriched instruction

Written reports of these efforts are included as **Attachment 5.2.4**. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan):
http://education.ohio.gov/GD/Templates/Pages/ODE/ODEDetail.aspx?page=3&TopicRelationID=1366&ContentID=3930&Content=65469

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

☐ **Planning**. Are steps underway to develop a plan?
- ☐ Yes, and **describe** the entities involved in the planning process, the time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math concepts.
- ☐ No.

☐ **Developing**. A plan is being drafted. The draft or planning documents are included as **Attachment 5.2.5**, if applicable.

☐ **Developed**. A plan has been written but has not yet been implemented. The plan is included as **Attachment 5.2.5**, if applicable.

☐ **Implementing**. A plan has been written and is now in the process of being implemented, or has been implemented. The plan is included as **Attachment 5.2.5**.

☒ **Revising.** The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 08-09 State Plan. The revisions or the revised plan are included as **Attachment 5.2.5**.

☐ **Other. Describe:**

a) Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2008-2009 State Plan.

***Plan Description**:*

The Ohio Professional Development Network (OPDN), a statewide committee of cross-sector stakeholders, has been meeting and working together since 2004 on key issues in the development of a professional development system. This group had evolved from the more informal gathering that had started in the 1990s to the more formal structure that currently exists.

In the fall of 2008, OPDN found that much of the work of its committees had culminated or had been naturally passed off to other entities. A need had arisen for the network to examine its current work plan, take stock of current goals and objectives, and then to vision for the future what the needs might be going forward. The network received assistance with the visioning process from the National Center for Child Care and Information and Technical Assistance Center (NCCIC). This one day retreat resulted in the network focusing the work on Workforce Development and Quality Assurance

OPDN has a Leadership Team which is comprised of co-chairs, committee chairs and other volunteers of membership who are charged with keeping track of the network's vision and progress. OPDN members meet on a quarterly basis to review state and local updates including, but not limited to T.E.A.C.H., Step Up To Quality, First Steps, Ohio Afterschool Network and special topics such as teacher licensure and articulation. Time is allocated for committees to work on their action plans during and in between meetings.

Workforce Development Committee

This newly formed committee is working on the dissemination plan for the Core Knowledge and Competency Instructor Guide. This committee has charged a writing team to develop the Core Knowledge and Competency for Administrators/Directors document. In addition, this committee is exploring the feasibility of increasing the availability of tiered professional development.

Quality Assurance Committee

This newly formed committee is working on Ohio's technical assistance systems which include coordinating the work of the various specialists who provide TA to Ohio's providers. Additional enhancements are being provided to the OPDN Registry such as reviewing the Career Pathway. In addition, evaluation and continuous improvement of all facets of OPDN will also be conducted.

As an extended part of the state visioning for the professional development system, OPDN is sending a state team to this year's NAEYC Professional Development Institute in Charlotte, North Carolina to network with other states and further develop our state professional development plan, specifically as it relates to the newly released NAEYC Workforce Designs: A

Policy Blueprint for State Professional Development Systems. Attendees will participate with the assigned facilitator and work to see that our plans are in-line with what is needed for our professional development system.

b) If developed, does the plan include (**Check EITHER yes or no for each item**):

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

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

1) ***Specific goals or desired outcomes***
Workforce Development Committee: 1) Dissemination of the CKC Instructor Guide, 2) Creation of an Administrator CKC and 3) Creation of a tiered professional development system for categorizing training. Quality Assurance Committee: 1) Identification of current technical assistance practice with recommendations made as needed, 2) Continuous improvement of the PD registry and3) Evaluation and continuous improvement of all of the products of OPDN.

2) ***A link to Early Learning Guidelines***
Step Up To Quality participation requires center staff to take prerequisites prior to taking other approved specialized training. Infant and Toddler teachers are required to take the Infant Toddler Guidelines training to meet their prerequisite; Preschool teachers are required to take early learning content standards training to meet their prerequisites and Schoolage teachers have training on k-12 standards training to meet their prerequisite. Instruction for the Infant Toddler guidelines and Early Learning Content Standards is broadly provided across the state and can be accessed by all early care and learning professionals in all programs and settings. EC Q-net, an early care and education training component

of The Ohio State University, provides instruction in the Early Learning Content Standards through a series of modules offered throughout the state several times per year. Infant/Toddler Specialists housed in each of the child care resource and referral areas provide seven-modules of Infant and Toddler Guidelines trainings at no cost to professionals. At least two series of modules are being offered annually in each of the twelve child care resource and referral service district areas.

3) Continuum of training and education to form a career path

A first draft of the career pathways model was developed in the late 1990s by a team of early childhood professionals, several of whom remain involved in OPDN. The idea for an electronic statewide professional registry was also conceived at this time. The original framework of the Career Pathways was revised from describing professional development for specific roles to describing levels of professional development attained through four pathways: formal education, in-service training and continuing education, experience, and credentials and certifications. A point system is used to represent professionals' levels of professional development along a continuum of six levels, from entry to mastery. Career Pathways levels are also used in an alignment to competency levels in Ohio's Core Knowledge.

Career Pathways assists professionals in tracking their professional development. Professionals involved in Step To Quality are automatically tracked on Career Pathways when they register with the Professional Registry. A sample professional development plan is provided that aligns with Career Pathways as well as Core Knowledge and Competencies. All trainings entered in to the Professional Registry are categorized by the core knowledge areas they fall under. As professionals complete their plans, they can clearly see the core knowledge areas that they have yet to take instruction which will help inform their future professional development goals.

4) Articulation from one type of training to the next

As the Professional Development Registry moves from its initial level to statewide, trainings and other professional development opportunities are being entered so that professionals can find opportunities that best meet their professional development needs. All of the trainings offered through the resource and referral system are posted on the Registry. All trainings and professional development opportunities entered in to the Registry are designated with a core knowledge content area. In the future, postings will also be required to have competencies listed as well so that the practice in early childhood settings can be identified.

The Governor's office charged the Ohio Board of Regent and the Ohio Department of Education to coordinate an Articulation Work Group. The goal of the work group is to create a seamless degree program for 2-

year to 4-year. The group agreed to use the NAEYC Higher Education principles (5 cornerstones) and the Ohio's Core Knowledge and Competencies document as a guide and foundational framework. The group is to have their recommendations to the Governor by Fall of 2009.

5) Quality assurance through approval of trainers

Instructors who provide professional development to child care staff for licensed child care centers as well as county-certified family child care providers must meet minimum requirements including education level and years of field experience as set by the licensing or certifying entity. The Ohio Department of Education approves professional development offered by qualified instructors for training staff of Early Learning Initiative (ELI) programs. The Ohio Department of Job and Family Services approves instructors and specific professional development opportunities earmarked for staff at centers participating in Step Up To Quality.

The approval systems for Departments of Education, Health and Job and Family Services have been unified and exist together as one system on the Registry. Trainers/instructors who wish to submit training for approval must have a registry profile with at least their education verified. They are provided access to the Professional Development Application Portal (PDAC) where they fill out one universal application for the session and one content plan and submit the application with materials for approvals for one, two or all three of the state agencies. Approvals are still processed by the respective agency representatives as they are given access to the submission when the specific approval has been applied for by an applicant.

6) Quality assurance through approval of training content

Training content for professional development opportunities must be approved by the Ohio Department of Education for professional development submitted by qualified instructors for staff at Early Leaning Initiative (ELI) centers. Content must be related Ohio's Early Learning Content Standards or for classroom preparation in order to meet approval standards. Additionally, content that is approved for Step Up To Quality must also be submitted by qualified trainers who have field-related education and experience. Specialized training for Step Up must be age-related for the children that staff care for and meet requirements such as the Infant and Toddler Modules, or the Early Learning Content Standards, or for professional development opportunities for afterschool providers.

Currently, content assurances include checks that are in place in the way that trainings are entered in to the Registry. All trainings entered in the OPDN Registry are listed with three learner objectives identified for trainings as well as the identification of the core knowledge area and competencies that the sessions align to. Additional quality assurances for approval of professional development opportunities are program-specific.

Quality assurances, such as instructor knowledge and experience, are reinforced through the use of the Registry as the repository of professional files and for the universal system for training/trainer approval.

7) A System to Track practitioners' training

With the transition of Step Up To Quality from pilot to statewide, entrance on the PD Registry became mandatory for all staff in centers that are seeking or holding a star-rating. The integration of the Registry into a high-impact, multi-faceted initiative helps serve as a fundamental professional development component of a statewide early care and learning system. The Registry utilizes the Career Pathways professional levels to assist in determining a center's final quality rating. Professionals entering their information on the Registry include their employment information/years of experience, education, training, and credentials.

While the mandatory status for Step Up To Quality has helped to place the Registry into statewide status as an important professional development tool, its use is not exclusive to Step Up participants. All early care and education professionals are encouraged to utilize the Registry as their own repository for their professional development. As the repository, the Registry will allow professionals to enter and track their trainings, assist in planning future professional development, and calculate their levels on Career Pathways. Additionally, professionals can search for training opportunities as opportunities are posted on The Registry website.

Registry users can print profiles and summaries from the Registry. Future plans for the use of Registry by professionals include adding a feature that will serve as an automatic reminder for professional credentials that are nearing expiration date, ability for professionals to print transcripts and resumes, and to create print-outs that will assist the professionals in creating their own individual professional development plans.

In the past year, the Director Information Portal (DIP) was created to provide directors and administrators access to limited professional development information concerning their staff and assist them in managing files and systems. The DIP allows access to directors and administrators who meet the following criteria: 1) they are listed as such with Licensing, 2) have a profile on the Registry, and 3) have at least one verified submission documented for their listed education. Once access has been given to a director for the DIP, then he or she can run reports for their staff that have reports showing staff training, both specialized and "all" training. They can also change titles and age groups that the staff work with and enter hire and termination dates.

8) Assessment or evaluation of training effectiveness

Professional development opportunities offered at the ODE-approved trainings include a requirement for all opportunities to be evaluated. Additionally, the child care resource and referral agencies as a system require that all opportunities have an evaluation conducted at the conclusion of each session. The use of one evaluation tool, which will be utilized in conjunction with the OPDN Registry, is being developed for the CR&R system. Additional pieces to help assure training effectiveness will be developed in alignment with the training/trainer approval process. With the completion of the PDAC, we hope to integrate a post-training system into the framework that will allow attendees to submit evaluations and then provide access for these evaluation results to the public.

9) State Credentials

The Ohio Department of Health has created a state credential for its Help Me Grow Service Coordinators who work with families of children birth to three who have developmental delays or are at-risk for delay. Attainment of the credential by service coordinators within the system involves a minimum requirement for education, a prescribed knowledge base in child development and associated subjects, as well as additional and on-going training requirements. The development of this credential as well as its on-going management by the Ohio Department of Health can help give direction and serve as a model for future similar work on credentials recognized statewide.

Currently the administrator core knowledge and competencies is being developed which can serve as a framework for an eventual director credential. The administrator core knowledge and competencies is in alignment with the current Core Knowledge and Competencies [for early care and education professionals] document and also reflects the specialized knowledge and skills necessary for the effectiveness of early care and education center administrators or directors. Specific specializations attached to the credential for infant/toddler and afterschool programming are being discussed.

10) Specialized strategies to reach family, friends, and neighbor caregivers

The state's network of 12 service district areas for child care resource and referral managed by eight agencies is one of very few providers of ongoing training opportunities throughout the state for early childhood professionals from most sectors. The agencies have historically reached out to family child care providers who are unregulated, (unregulated beyond the number of children cared for in their homes), to offer registry through the agencies as well as well as resources to access training, support, technical assistance, and child care referrals. Ongoing recruitment is conducted by the agencies and recruited providers are then given access to training information offered in the agency's service district area(s).

Additional training opportunities are provided by local Associations for the Education of Young Children (AEYC), as well as an annual conference co-hosted by the Ohio AEYC and the Ohio Department of Education. An annual state conference is provided by a statewide family child care provider association. County Departments of Job and Family Services also have limited certification for friends and family providers and the county departments offer opportunities for professional development.

Ready to Learn and Ready to Learn Early series are trainings offered for providers who care for preschoolers and infant/toddlers, respectively. They are both offered by PBS specialists who act as trainers for the prescribed series, or by those who are under contract with their local PBS stations. Incentives for attendance (classroom materials and activities) are provided to those who complete sessions offered through the series.

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

e) Are the professional development opportunities described in the plan available:
Note: Check <u>either</u> yes or no for each item):

	Yes	**No**
Statewide	☒	☐
To Center-based Child Care Providers	☒	☐
To Group Home Providers	☒	☐
To Family Home Providers	☒	☐
To In-Home Providers	☒	☐
Other (**describe**):	☐	☐

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

Early Language, Literacy, Pre-Reading, and Early Math Linkages

In 2001, Ohio passed the Amended Substitute House Bill 94 that empowered the Ohio Department of Education Office of Early Childhood and Office of Curriculum and Instruction to collaborate and convene a team of stakeholders in the creation of early learning content standards in key areas to align with K-12 standards. The Ohio Early Learning Content Standards (ELCS) for preschool children were then developed and became a framework for alignment of professional development opportunities for certain key initiatives. The Ohio ELCS include

standards in the areas of English Language Arts, Mathematics, Science, and Social Science.

Early care and education settings offering ELI have a requirement that teachers must be instructed in the Early Learning Content Standards. Trainings offered for these standards must be approved by the Ohio Department of Education and the instructors who submit these professional development opportunities must meet certain requirements as far as their own education, experience, and training.

Training in the ELCS is also a requirement in Step Up To Quality for teachers of preschool children. Teachers of infants and toddlers are required to attend training in the Infant and Toddler Guidelines, another state document that assists in providing a solid educational framework for teachers of young children. Grants that are offered through Step Up To Quality participation include funding for curricula which must align to the Early Learning Content Standards.

Early Language and Literacy Specialists (ELLS) are available to programs for consultation and training. There are 16 ELLS in the state of Ohio, funded by the Ohio Department of Education and Ohio Department of Job and Family Services. EC QNet manages the day-today activity of the ELLS. In the past two years, the ELLS have also implemented a Teacher Leader Project that provides coaching/mentoring to programs on a voluntary basis in language and literacy and participation by programs in the project has been growing.

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

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

Program and Provider-level Incentives

Programs participating in SUTQ receive annual quality achievement awards. The amount programs receive is based on a formula that utilizes enrollment, star rating and the number of subsidized children. Programs must utilize the funding based on a list of approved expenditures

EC QNet is an entity affiliated with The Ohio State University and is a provider of instruction for teachers of young children. EC Q-net provides no-cost opportunities for teachers to learn how to instruct young children in alignment with the Early Learning Content Standards through a series of modules in each standards area as specialized literacy instruction through the SIRI modules, State Institutes for Reading Instruction. In-service credit is available for the Q-net and SIRI sessions which meet training requirements for ELI and SUTQ. Continuing education credits, at a nominal fee, as well as college course credits are

available to participants seeking these additional pieces for their professional development.

Trainings, in addition to those provided by EC Q-net, for SUTQ are offered to participants at no cost through the area resource and referral agencies. Specialized trainings are provided for teachers on the ELCS as well as in Afterschool, and for the Infant and Toddler Guidelines Modules. Continuing education credits are available for these opportunities in most regions.

Funding for early childhood associate degree programs through T.E.A.C.H. Ohio is available at several institutions across the state and several bachelor degree scholarships are available in one community. T.E.A.C.H. funding is also available for CDA applicants. Step Up To Quality has helped promote the use of T.E.A.C.H. scholarships as well as encouraging programs to employ degreed staff or staff that have attained a specific level on the Career Pathways model.

Incentives in the form of classroom materials are offered for attendees for the participants in the Ready to Learn and Ready to Learn Early sessions provided by the PBS consultants.

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

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

☒ Yes. **Describe** how the professional development plan's effectiveness/goal is assessed.

Professional Development Plan Assessment

The statewide committee of the OHPD Network follows a work plan that is written annually. An overall plan is written for the network with individual work plans for each committee. The plans are revisited at each meeting and participants are asked for feedback in formulating, reviewing, and updating the overall plan as well as each sub-committee plan.

In the fall of 2009, NCCIC facilitated a process for OPDN to review our goals and work progress which resulted in new committees.

☐ No. **Describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement.

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

☒ Yes. **Describe** how specific professional development initiatives or components' effectiveness is assessed.

Professional Development Initiatives and Components Assessment

Programs such as Step Up To Quality and Ohio's infant/toddler initiative, First Steps, each have their own assessment process. Current data from Step Up is also being assessed by the Ohio State University . Data being collected for SUTQ includes surveys, questionnaires, environment rating scales and child assessments.

OPDN Committees routinely update their work plans and report progress to the OPDN Leadership team.

☐ No. **Describe** any plans to include assessments of specific professional development initiatives or components' effectiveness.

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

☒ Yes. **Describe** how assessment informs the professional development plan.

Revisions to Professional Development Plan

Feedback for the overall plan, committee plans, and for all of the components of Ohio's professional development system are continuously sought and gathered through the interaction of the statewide network. The Quality Assurances Committee has now been given the charge to implement a continuous improvement model for all of the products and components of the committee. A great strength of the committee is in the diversity of the membership with representation from child care providers, Head Start, state and statewide agencies, resource and referral, 2 and 4 year institutions, social service agencies, and early childhood mental health providers. This helps ensure that feedback is continuously provided from all of the neighborhoods in the early childhood and afterschool field.

Surveys were sent out to the 2 year and 4 year colleges and universities in regard to the CKC. An additional survey was also submitted through the listserv. When the committee "re-visioned" its work with the help of NCCIC, evaluations and feedback were provided throughout the process to inform leadership of any changes needed. Additionally, work plans are updated on an ongoing basis and reviewed at least annually.

The network meets several times per year with additional meetings of the committees. Feedback is sought on all facets of the system and is then utilized to help drive decision making in writing, implementation, and revisions of work plans. Since the committee includes so many professionals who are involved in the field at varying levels, the feedback is rich, varied, and useful and assists in ensuring that

the work involved in the Ohio's professional development system is meeting the needs of early care and education professionals as well as that of the demands of the field as a whole.

☐ No. **Describe** any plans to include assessment to inform the professional development plan.

PART 6
HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

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

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. **Note: This database typically contains information on licensing requirements for meeting State or local law to operate (§98.40). This database does not contain *registration* or *certification* requirements specific only to participation in the CCDF program.**

In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements.

The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

CCDF regulations (§98.2) define the following categories of care:

- **Center-based child care provider:** Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

- **Group home child care provider:** Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

- **Family child care provider:** One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.

- **In-home child care provider:** Individual who provides child care services in the child's own home.

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

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law per the NRCHSCC's compilation? **Note**: Some States use the term

certification or registration to refer to their licensing regulatory process. Do not check "Yes" if center-based providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

☒ Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.

☐ No. **Describe** which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.

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

☐ Yes, and the changes are as follows:

☒ No.

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for center-based child care services provided under the CCDF

6.2 Health and Safety Requirements for Group Home Child Care Providers

(658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? **Note**: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if group home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

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

(Group Home is for the purpose of this report is defined as a licensed Type A home, which provides services for no more than 12 children).

☐ No. **Describe** which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

☐ N/A. Group home child care is not a category of care in this State. Skip to Question 6.3.1

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

☐ Yes, and the changes are as follows:

☒ No.

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for center-based child care services provided under the CCDF

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

6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? **Note**: Some States use the term certification or registration to refer to their licensing regulatory process. Do not check "Yes" if family child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

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

☒ No. **Describe** which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.
Ohio "certifies" through the county departments of job and family services, not licenses, small family, Type B child care providers (fewer than 7 children) paid with CCDF funds.

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

☐ Yes, and the changes are as follows:

☒ No.

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

a) The prevention and control of infectious disease (including age-appropriate immunizations)
Family child care providers must complete training in communicable disease within one year of certification. Parents must submit an annual medical for each child with verification of the child's receipt of the immunizations recommended by the Ohio Department of Health or with an exemption statement.

b) Building and physical premises safety
Annual fire inspection required; rule requirements regarding furniture, equipment, materials and environmental safety for both indoor and outdoor areas; rule requirements for fire drills and emergency evacuation; rule requirements for safe and sanitary equipment and environment.

c) Health and safety training
Family child care providers must complete a department-issued course on health and safety in family child care within six months of certification.

d) Other requirements for center-based child care services provided under the CCDF
Rule requirements for safe transportation, safe sleep, administration of medication, child guidance, meal preparation, swimming and infant care.

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

Note: Before responding to Question 6.4.1, **check** the NRCHSCC's compilation of licensing requirements to verify if **in-home child care** as defined by CCDF and your State is covered. If not, **check** no for 6.4.1. Do not check "Yes" if in-home child care providers simply must *register* or *be certified* to participate in the CCDF program separate from the State regulatory requirements.

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

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

☒ No. **Describe** which in-home child care providers are exempt from licensing under State law and answer 6.4.2 and 6.4.3.

Ohio Certifies, not licenses, in-home child care providers, paid with CCDF funds.

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

☒ Yes, and the changes are as follows:

Effective 2008, there were additional training requirements for communicable disease and child abuse.

☐ No.

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

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

In-home family child care providers must complete training in communicable disease within one year of certification. Each child who is not attending school must obtain a physical examination within 30 days of the child's first day of attendance and annually thereafter. Parents must submit a child enrollment and health information form for each child by the first day of care; this is updated annually. This form includes verification of the child's receipt of the immunizations recommended by the Ohio Department of Health or with an exemption statement.

b) Building and physical premises safety
Rules require that parents and providers verify in writing on a standard form that minimum health and safety requirements are being met; local agencies conduct inspections.

c) Health and safety training
In-home family child care providers must complete a department-issued course on health and safety in family child care not more than six months prior to certification.

d) Other requirements for child care services provided under the CCDF
Rule requirements for safe transportation, safe sleep, administration of medication, child guidance, meal preparation, swimming and infant care.

6.5 Exemptions to Health and Safety Requirements

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

Indicate the Lead Agency's policy regarding these relative providers:

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

6.6 Enforcement of Health and Safety Requirements

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

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

☒ Yes, and **indicate** the provider categories subject to routine unannounced visits and the frequency of those visits:

ORC 5104.04(B) requires two inspections yearly for full time programs, one of which must be unannounced, and both may be unannounced. Part time programs are to be inspected once every year. Centers and Type A Homes in Ohio receive two year licenses.

Prior to licensure, each Center and Type A home must be inspected /investigated to determine full compliance with ORC and OAC requirements.

The licensee is inspected at least once within the initial provisional licensing period; upon receipt of complaints; at least twice annually during each year of licensure (at least one unannounced inspection) and upon request for change in license terms (e.g. capacity, administrator.)

If ODJFS/BCCD determines the licensee to be noncompliant with ORC and/or OAC requirements, the ODJFS director must notify the licensee of the nature of the violation, the corrective action needed, and a deadline for the correction of the violation. If the correction is not made by the established date, the ODJFS director may begin action under Chapter 119 of the ORC to revoke the license or deny the renewal application.

If the ODJFS director determines that a center or Type A home is operating without a license, the ODJFS director may request that a petition for injunctive relief be filed in the local court of common pleas.

Type B Home providers, in-home aides, and limited certified providers are certified under state law by the local CDJFS based on rules adopted by ODJFS. These providers are subject to the health and safety requirements delineated within the NRCHSCC's compilation as referenced. The local CDJFS director enforces these health and safety regulations.

Certified professional family home providers are inspected at least twice annually, at least one of these inspections is unannounced, and certified Limited family home providers, with the exception of the Parent Provider Inspected (PPI) provider, are inspected at least once annually. PPI providers are inspected at initial certification, upon re-certification after two years, or if the provider moves.

If the provider is determined to be out of compliance with ORC and/or OAC regulations, the CDJFS may request action be taken by ODJFS/BCCD under Chapter 119 of the ORC.

☐ No.

b) Are child care providers subject to background checks?

☒ Yes, and **indicate** the types of providers subject to background checks and when such checks are conducted:

All licensed centers, licensed Type A homes and certified professional and limited family home child care providers in the State of Ohio, including the certified PPI family home child care provider and registered day camps must submit to a BCII background investigation upon employment to confirm eligibility for employment in a child care setting and every four years thereafter.

☐ No.

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

☒ Yes, and **describe** the State's reporting requirements and how such injuries are tracked (if applicable):
All regulated child care providers, licensed and certified, are required to contact ODJFS/BCCD within 24 hours to report all serious injuries. They must submit a written report within 72 hours to ODJFS/BCCD by completing and submitting the Incident/Injury Report Form. This information is entered into a data system.

☐ No.

d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:

Centers and Type A Homes are inspected at least once within the initial provisional licensing period; upon receipt of complaints; at least twice annually during each year of licensure (at least one unannounced inspection) and upon request for change in license terms (e.g. capacity, administrator.)

Certified Type B professional home providers are inspected at least twice annually. At least one of these inspections is unannounced.

6.7 Exemptions from Immunization Requirements

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

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

☐ Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).

☐ Children who receive care in their own homes.
☒ Children whose parents object to immunization on religious grounds.
☒ Children whose medical condition contraindicates immunization.

Immunization requirements for Certified Type B homes may be waived by the CDJFS director for religious reasons upon submission of the parent's written request for exemption, or for medical reasons upon submission of a request for exemption in the form of a statement signed by a licensed physician. The parent's request and the county director's waiver shall be on file at the CDJFS and the CDJFS director shall provide a copy to the provider. The waiver request and approval shall be updated annually by the parent and the CDJFS director.

Children in licensed child care centers or Type A family child care homes may only be exempted from immunizations through approval from the physician completing their annual medical statement.

PART 7
HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

(Only the Territories complete Part 7)

CCDF regulations (§98.2) define the following categories of care:

- **Center-based care:** Provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

- **Group home child care provider:** Two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.

- **Family child care provider:** One individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.

- **In-home child care provider:** Individual who provides child care services in the child's own home.

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

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for child care services provided under the CCDF

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

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for child care services provided under the CCDF

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

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for child care services provided under the CCDF

7.4 Health and Safety Requirements for In-Home Child Care Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

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

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

b) Building and physical premises safety

c) Health and safety training

d) Other requirements for child care services provided under the CCDF

7.5 Exemptions to Territorial Health and Safety Requirements

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

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

7.6 Enforcement of Territorial Health and Safety Requirements

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

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

☐ Yes, and **indicate** the provider categories subject to routine unannounced visits and the frequency of those visits:

☐ No.

b) Are child care providers subject to background checks?

☐ Yes, and **indicate** the types of providers subject to background checks and when such checks are conducted:

☐ No.

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

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

☐ No.

d) Describe any other methods used to ensure that health and safety requirements are effectively enforced:

7.7 Exemptions from Territorial Immunization Requirements

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

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

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

APPENDIX 1
CCDF PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

(1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))

(2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))

(3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))

(4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))

(5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))

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

(7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

(1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

(2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

(3) it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))

(4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))

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

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

(7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

APPENDIX 2
ELIGIBILITY AND PRIORITY TERMINOLOGY

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

- *attending* (a job training or educational program; include minimum hours if applicable) -
  Satisfactory participation criteria requires that the eligibility worker determine the participant's attendance in regards to a level of frequency that ensures the participant's satisfactory participation.

- *in loco parentis* -
  Per OAC Rule, any adult(s) who is charged by blood, marriage, adoption or law with the rights, duties and responsibilities of a mother and/or father and whose presence in the home is needed to perform these rights, duties and responsibilities.

- *job training and educational program* -
  Voluntary or mandatory on-the-job training program or educational program leading to permanent employment.

- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) -
  A physical or mental condition, which renders a child incapable of caring for him/herself as verified by the CDJFS, based on a determination by a licensed physician or licensed or certified psychologist.

- *protective services* -
  As verified by the CDJFS, a child or children residing in a home with the caretaker parent and for whom a case plan is prepared and maintained pursuant to §2151.421 of the ORC which indicates the need for protective child care services. Protective services may also be authorized when a child and his caretaker parent either temporarily reside in a facility providing emergency shelter for homeless families or are determined to be homeless by the CDJFS and are otherwise ineligible for child care services.

- *residing with* -
  Sharing the same home with caretaker parent, person who has legal custody of the child, a guardian of the child or any other person who stands in loco parentis with respect to the child, and whose presence in the home is needed as caretaker of the child.

- *special needs child* -
  A child who is under age eighteen years old who does not function according to age-appropriate expectations in one or more of the following areas of development: social/emotional, cognitive, communication, perceptual-motor, physical, or behavioral development, or the child has chronic health issues. The child's delays/condition(s) affect development to the extend that the child requires special adaptations, modified facilities,

program adjustments or related services on a regular basis in order to function in an adaptive manner.

- *very low income* -
  Income at or below 10% of the federal poverty level which is exempt from monthly co-payment requirements as mandated by OAC 5101:2-16-39.

- *working* (include minimum hours if applicable) -
  Participation, as verified by the CDJFS, in paid employment either on a full time or part time basis.

- Additional terminology related to conditions of eligibility or priority established by the Lead Agency:
  Transitional - At any time during the immediately following twelve-month period that an assistance group ceases to participate in the work component of the Ohio Works First (OWF/TANF) program if: child care is required due to employment or training and the assistance group's income does not exceed current eligibility criteria.

APPENDIX 3: ADDITIONAL CERTIFICATIONS

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

1. **Assurance of compliance with Title VI of the Civil Rights Act of 1964:**
   http://www.hhs.gov/forms/HHS690.pdf

2. **Certification regarding debarment:**
   http://www.acf.hhs.gov/programs/ofs/grants/debar.htm

3. **Definitions for use with certification of debarment:**
   http://www.acf.hhs.gov/programs/ofs/grants/debar.htm

4. **HHS certification regarding drug-free workplace requirements:**
   http://www.acf.hhs.gov/programs/ofs/grants/drugfree.htm

5. **Certification of Compliance with the Pro-Children Act of 1994:**
   http://www.acf.hhs.gov/programs/ofs/grants/tobacco.htm

6. **Certification regarding lobbying:**
   http://www.acf.hhs.gov/programs/ofs/grants/lobby.htm

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If the there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.

REQUIRED ATTACHMENTS

2.2 Public Hearing Comments

3.1.1 Child Care Manual
http://emanuals.odjfs.state.oh.us/emanuals/GetTocDescendants.do?nodeId=%23node-id(59)&maxChildrenInLevel=100&version=8.0.0

3.2.1 Child Care Provider Payment Rates
http://emanuals.odjfs.state.oh.us/emanuals/DataImages.srv/emanuals/pdf/pdf_forms/2-16-41APX3-30-07.PDF

3.2.3 Market Rate Survey tool and analysis of findings
http://jfs.ohio.gov/cdc/docs/market_rate_survey2006.pdf

3.5.1 Sliding Fee Scale for Child Care Services
http://emanuals.odjfs.state.oh.us/emanuals/DataImages.srv/emanuals/pdf/pdf_forms/2-16-39APXA.PDF

4.1.1 Parent Application for Subsidized Child Care
http://www.odjfs.state.oh.us/forms/file.asp?id=55454

5.2.1 Birth to Three Guidelines
http://jfs.ohio.gov/cdc/InfantToddler.pdf

Three to Five Guidelines (Early Learning Content Standards)
http://www.education.ohio.gov/GD/Templates/Pages/ODE/ODEPrimary.aspx?page=2&TopicRelationID=1389

K-12 Guidelines (Content Standards)
http://education.ohio.gov/GD/Templates/Pages/ODE/ODEPrimary.aspx?Page=2&TopicID=1695&TopicRelationID=1696

5.2.3 Materials to support implementation of Early Learning Guidelines (Standards)

5.2.4 Assessment of Early Learning Guidelines (Standards)
http://education.ohio.gov/GD/Templates/Pages/ODE/ODEDetail.aspx?page=3&TopicRelationID=1366&ContentID=3930&Content=65469

5.2.5 Professional Development Plan
http://www.ohpdnetwork.org/