

CHILD CARE & DEVELOPMENT FUND SERVICES

(FOR THE PERIOD 10/1/03 – 9/30/05)



**CHILD CARE AND DEVELOPMENT FUND PLAN
FOR
FFY 2004-2005**

This Plan describes the CCDF program to be conducted by the State for the period 10/1/03 – 9/30/05. 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 162.57 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 02-29-2004)

STATE PLAN FOR STATE OF OREGON

Final Revisions 8/1/03

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PART 1 -- ADMINISTRATION

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

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

Name of Lead Agency: Oregon Employment Department, Child Care Division

Address of Lead Agency: P.O. Box 14050, Salem OR 97309-4050

Name and Title of the
Lead Agency's Chief Executive Officer: Deborah Lincoln, Director, State of Oregon,
Employment Department

Phone & Fax Numbers: (503) 947-1477, Fax (503) 947-1472

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

Name and Title of the
State Child Care Contact (CCDF): Tom Olsen, Administrator, Child Care Division

Address of Contact: P.O. Box 14050, Salem OR 97309-4050

Phone & Fax Numbers: (503) 947-1409, Fax (503) 947-1428

E-Mail Address: tom.l.olsen@state.or.us

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, 2003 through September 30, 2004. (§98.13(a))

- Federal Child Care and Development Fund: \$ 58,707,764
- Federal TANF Transfer to CCDF (if known): \$ 0
- Direct Federal TANF Spending on Child Care (if known): \$ 2,400,000
- State CCDF Maintenance of Effort Funds: \$ 11,714,966
- State Matching Funds: \$ 11,318,090
- Total Funds Available: \$ 85,007,349

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1.4 The Lead Agency estimates that the following amount (and percentage) of the CCDF will be used to administer the program (not to exceed 5 percent): \$ 2,956,463 (5 %). (658E(c)(3), §§98.13(a), 98.52)

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

() Yes. – GO to Section 1.8.

(X) No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies. (658D(b)(1)(A), §98.11)

The Child Care Division (CCD) administers contract payments to organizations and providers serving children in high risk targeted populations. CCD contracts with other agencies and organizations to provide specific services funded under the CCDF Act including:

- The Oregon Department of Human Services (DHS) administers the Integrated Child Care Subsidy program for children of low income working parents and post-secondary student parents. DHS also contracts with Head Start programs to provide full day/full year care for children from low income working families.
- The Center for Career Development in Childhood Care and Education administers training development, career development, and school-age care programs.
- The Oregon Commission on Children and Families administers local grants to improve the quality of early childhood care, including infant and toddler, before and after school, and nontraditional hours, sick and special needs. These grants are guided by 36 community comprehensive plans, which include strategies for services and supports in the areas mentioned.
- The Department of Education administers grants to school districts to improve quality in child development and teen parent programs.
- The Oregon Child Care Resource & Referral Network (OCCRRN) administers seventeen (17) local Child Care Resource and Referral agencies statewide to provide resource and referral information for parents and employers; deliver training to child care providers; and provide supply and demand data to state agencies and policy makers.

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The CCD maintains overall control by monitoring contracts for compliance with performance standards. Contractors are required to submit quarterly performance reports. Onsite visits are conducted if indicated by the reports. Contract language requires other agencies to certify that guidelines are followed. Also, contracts contain statements of work that include specific performance indicators.

Contracts for new projects are let through a request for proposal process. Existing contracts are renewed based on satisfactory performance as evidenced by the quarterly reporting/monitoring process. The lead agency moved to a single contract process with the Oregon Child Care Resource & Referral Network in 2002.

When administration has devolved to localities, funds are allocated through a single contract between the lead agency and the Oregon Commission on Children and Families (OCCF). The OCCF requires each of the counties to submit quarterly monetary and semi-annual progress toward outcomes reports. Local commissions are required to submit a Community Comprehensive Plan that includes childhood care and education.

1.6 For child care services funded under §98.50 (i.e., certificates, vouchers, grants/contracts for slots based on individual eligibility), does the Lead Agency itself: (§98.11)

- Determine individual eligibility of non-TANF families? YES ___ NO X
If NO, identify the name and type of agency that determines eligibility of non-TANF families for child care:

The Department of Human Services, as Oregon's primary subsidy agency and the TANF lead agency, determines the eligibility for Employment Related Day Care services. The Child Care Division enters into agreements with programs and providers to determine eligibility of children in high risk targeted populations.

- Determine individual eligibility of TANF families? YES ___ NO X
If NO, identify the name and type of agency that determines eligibility of TANF families for child care:

The Department of Human Services, TANF lead agency, determines eligibility of TANF families for child care.

- Assist parents in locating child care? YES ___ NO X
If NO, identify the name and type of agency that assists parents:

The Child Care Division enters into an agreement with the Oregon Child Care Resource & Referral Network to assist parents in locating child care.

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- Make payments to providers? YES NO

If NO, identify the name and type of agency that makes payments:

The Department of Human Services administers payments to providers caring for children of low income working parents through the Direct Pay Unit under an integrated child care subsidy program. The Child Care Division administers payments to programs serving high risk targeted populations, including migrant and seasonal workers, teen parents, parents in substance abuse treatment, and children with special needs or disabilities.

1.7 Is any entity named in response to section 1.6 a non-governmental entity? (658D(b), §§98.10(a), 98.11(a))

() No.

(X) Yes, the following entities named in section 1.6 are non-governmental:

The Oregon Child Care Resource & Referral Network is a not-for-profit organization. Some providers assisting high risk families are not-for-profit organizations.

Section 1.8 - Use of Private Donated Funds

1.8.1 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) and (f)?

() No. GO TO 1.9

(X) Yes. The name and type of entity designated to receive private donated funds is:

Name: Child Care Division

Address: 875 Union Street NE, Salem, OR 97311

Contact: Tom Olsen, Administrator

Type: (government/~~private non-profit~~/~~private for-profit~~)

The Lead Agency is aware that all private donations need to be transferred to the Child Care Division before they can be used or to use them as match.

Section 1.9 - Use of State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children

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

() No.

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 Yes,

 X 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).

 20% Estimated % of the MOE requirement that will be met with pre-K expenditures. (It may not exceed 20%.)

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

CCD and DHS collaborate with Pre-K programs to provide full day and full year care for children of low income working parents and student parents. The State contributes funds to match Pre-K expansion grants awarded for full day and full year care.

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

 No. Yes, and

 20% Estimated % of the Matching Fund requirement will be met with pre-K expenditures. (It may not exceed 20%.)

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

CCD and DHS collaborate with Pre-K programs to provide full day and full year care for children of low income working parents and student parents. The State contributes funds to match Pre-K expansion grants awarded for full day and full year care.

1.9.3 If the State answered yes to 1.91 or 1.9.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents (§98.53(h)(2)):

The State provides wrap-around funding for children eligible for the Employment Related Day Care program that also attend Head Start/Pre-K programs. This allows working parents to have child care available full-day and year around.

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Part 2--DEVELOPING THE CHILD CARE PROGRAM**2.1 - Consultation and Coordination**

2.1.1 Consultation. Describe the consultation the Lead Agency held in developing this Plan and the results of that consultation. At a minimum, the description must include the following:

- Representatives of local governments;
- Tribal organizations when such organizations exist within the boundaries of the State. (658D(b)(2), §§98.12(b), 98.14(b))

Development of Oregon's CCDF Plan was guided by the State Childhood Care and Education Coordinating Council. The Council is a collaborative, ad hoc partnership working to create a balanced system of care that supports and empowers working families and promotes safe, healthy, child development. The Council's role is to advise the Child Care Division and other member agencies and organizations on:

- Developing the federal Child Care and Development Fund Plan;
- Building the child care system infrastructure;
- Coordinating programs and service delivery; and,
- Creating and prioritizing new projects.

The CCD consults with the Oregon Commission on Children and Families, a state agency that is part of a state-local system of prevention-based services and supports for families and children, prenatal through age 18. Local commissions, which reside in each of Oregon's 36 county governments, develop a community coordinated comprehensive plan for meeting the needs of children and families, including childhood care and education.

CCD also consults with the Oregon Commission for Child Care, an 18 member body appointed by the Governor and Legislative leadership. The Commission makes a biennial report on child care issues to the Governor. The lead agency incorporates those recommendations into the federal plan.

Each of Oregon's nine federally recognized Tribes are provided copies of the draft plan and encouraged to comment.

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2.1.2 Coordination. Lead Agencies are required to coordinate with other Federal, State, local, tribal (if applicable), and private agencies providing child care and early childhood development services.

The Child Care Education and Coordinating Council is chaired by the Administrator of the Child Care Division. Meetings are open to all interested persons and are held bi-monthly.

Membership includes representatives of the following agencies, organizations, and constituency groups:

Department of Human Services (DHS)/Child Care	DHS – Child Protective Services
Commission on Children and Families	Child Care Resource & Referral Network
Commission for Child Care	Department of Education (DOE)/Head Start
DHS – Health Services	Oregon Family Child Care Network
DOE – Child Nutrition Programs	Assoc. for the Education of Young Children
DOE – Early Childhood Education	Assoc. of Community Development Orgs.
Center for Career Development	Oregon Student Association
Provider Resource Organization	Oregon Council on Developmental Disabilities
DOE – Special Education	Oregon State Library
School Age Care, Education, Recreation	Association of Child Care Directors
Oregon Child Development Coalition	DHS – Drug and Alcohol Prevention
Parent Voice Project (6)	Oregon Child Care Research Partnersh
Oregon Community Foundation	Child Care Division
Child Care Resource & Referral agencies	

To achieve the widest involvement possible in the planning process, the Council has created workgroups that examine specific topics and reach beyond workgroup participants to additional constituencies and community members. Each workgroup develops planning recommendations and priorities and presents findings to the Council. These recommendations form the basis for development of the federal plan review draft. Copies of the draft plan were made available statewide prior to the public hearing.

Check any of the following services provided by agencies with which the Lead Agency coordinates. In each case identify the agency providing the service and describe the coordination and expected results:

X Public health including programs that promote children's emotional and mental health.

The Department of Human Services, Health Services, provides early childhood health services. The coordination is expected to result in referrals to quality child care for those who require it.

X Healthy Child Care America Campaign.

The Department of Human Services, Health Services, administers Healthy Child Care America. The coordination has resulted in a pilot project to make public health nurse consultants available to child care providers.

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As Lead Agency, the Child Care Division is within the Oregon Employment Department to highlight child care as a workforce issue. The coordination has resulted in Employment Department funding for a campaign aimed at informing employers about Oregon's employer tax credits and family friendly policies.

X Public education.

The Lead Agency coordinates with the Oregon Department of Education (ODE) on early learning standards and Pre-K services. One result of the coordination is publication of the early learning guide "The Essential Elements of Programs for Children. Another is the development of on-campus child care programs for teen parents.

X TANF.

The Lead Agency contracts with the TANF agency to administer the state's low-income child care subsidy program. Results include a tiered-reimbursement program for informal providers and a special needs rate for children with disabilities.

X State Pre-K programs.

Through the TANF agency, CCD provides funds for a wrap around Head Start/Pre-K program.

X Head Start programs.

Oregon Pre-K is the state funded portion of Head Start.

X Programs that promote inclusion for children with disabilities.

The Lead Agency provides CCDF funds to the Oregon Council on Developmental Disabilities for the Inclusive Child Care Program. This program serves families who have children with disabilities and are eligible under federal guidelines but whose incomes exceed the State's limits for ERDC. The TANF agency has a high needs program that pays a higher rate based on individual assessment.

X Others (please identify) (658D(b)(1)(D), §98.12(a), 98.14(a)(1) & (2)).

The Lead Agency coordinates with the Oregon Commission on Children and Families on the statewide local community comprehensive plan, which includes an early childhood care and education component. Results of the local planning are incorporated into the federal plan.

2.2 - Public Hearing

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

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A public hearing on the federal Child Care and Development Fund (CCDF) Plan was held in Salem on June 24, 2003, 6-8 p.m., at the Employment Department Auditorium. Hearing notices were posted on the agency web site, and made available to interested parties, state and local agencies, organizations and tribal governments. Notice of hearing was printed in a statewide newspaper of general circulation at least 20 days before the scheduled hearing. A transcript of the public hearing is on file at the lead agency office. A copy of the hearing notice is included in Attachment A.

The content of the CCDF Plan was made available to the general public and statewide constituency groups through the members and committees of the Child Care and Education Coordinating Council. The CCDF Plan was also posted on the lead agency Web site with an electronic comment submissions form and made available through all child care resource and referral agencies.

2.3 - Public-Private Partnerships

- **Describe the activities, including planned activities, to encourage public-private partnerships that promote private-sector involvement in meeting child care needs, including the results or expected results. (658D(b)(1), §98.16(d)):**

- 1) **Commission for Child Care:** The commission is comprised of 18 members appointed by the Governor, Speaker of the House and President of the Senate. The commission includes legislators, business members, parents, and advocates. It reports to the Governor and advises the lead agency on child care policy.

Result: Extensive public input to child care policy through statewide hearings on child care issues. This information is used to develop legislation and advocacy to improve the child care system.

- 2) **Childhood Care and Education Coordinating Council (CCECC):** The council is comprised of representatives from state and private non-profit agencies, advocates, and consumers. It is responsible for developing the federal child care plan and coordinating the activities of agencies and partners to develop new programs and avoid duplication of effort.

Result: Coordination, communication, and dissemination of information throughout Oregon's child care community; elimination of duplication of effort.

- 3) **Oregon's Child: Everyone's Business** is an educational campaign focusing on brain research and involving more than a dozen public and private partners. The campaign is continuing in the next plan cycle, is partially funded by the CCDF, and offers free resource information in English and Spanish for parents, caregivers, businesses and

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organizations. Presentations on brain research findings are available to community groups and printed materials offer practical information on parenting and child development.

Result: Dissemination of information on brain development and research to providers, consumers, and the general public.

- 4) **Child Care Information Partnership** develops educational strategies including printing and disseminating parent information including the “Five Steps to Finding Quality Child Care” booklet and bookmark, and coordination of the “Employer of Choice” campaign to inform employers about Oregon’s child care tax credits and the benefit of family-friendly policies.

Result: Education of parents about finding quality child care and the general public about the importance of child care as a social support. Increased parental awareness about why child care quality matters.

- 5) **Child Care/Health Links Project** is a partnership between Oregon’s child care partners and the Oregon Pediatric Society aimed at developing a state-wide system of health consultation to providers.

Result: Improvement of children’s health through provider health education and consultation.

- 6) **Inclusive Child Care** is a partnership between state agencies and advocates for children with special needs. The campaign is aimed at giving child care providers the information, training, and support they need to care for children with special needs, and developing subsidies for families based on the needs of the child.

Result: Inclusion of children with special needs in normal child care settings.

- 7) **Child Care Financing Taskforce** was mandated by the 2001 legislature. The lead agency participated on the taskforce, which was convened by the Commission for Child Care. The taskforce included business, community, and state leaders and developed specific strategies to assist in financing quality child care in Oregon.

Result: The Child Care Financing Taskforce involved business and public entities. The Task Force Report was completed and submitted to the 2003 Legislative Assembly with recommendations on alternative methods to finance child care. Recommendations for state policy on child care financing also were included.

- 8) **Oregon Early Childhood Team** was developed as a result of 2001 legislation outlining an early childhood system of services and supports. The Early Childhood Team (ECT)

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provided leadership and policy direction for the work of state and local partners to develop comprehensive systems of services and supports for children and their families, State and local ECTs. The lead agency participates on the state team, along with members from other state agencies, the Department of Corrections, the Oregon Pediatric Association and other private partners.

Result: Early Childhood Teams at the local level that work with local Commissions on Children and Families to integrate plans for services to children 0-18 years of age.

- 9) **Oregon Summit: Children's Emotional Health at Risk** was organized and held in September, 2002. It was an invitational and working summit for approximately 200 state legislators, public agencies, local child care entities, and parents. The summit was based on a needs assessment that determined the emotional health needs of children were not being met. National speakers spoke on model health consultant models. Primary sponsored was the Head Start collaboration project along with the Oregon Child Care Resource and Referral Network and other child care partners.

Results: Development of a statewide action plan, which focused on seven core activities:

- Mount a public information campaign
- Build a system of services and supports
- Increase training opportunities
- Institute use of onsite consultation, assessment and intervention models
- Make policy modifications
- Provide financial strategies and support
- Insure planning and documentation

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PART 3 -- CHILD CARE SERVICES OFFERED

Section 3.1 - Description of Child Care Services

REMINDER: The Lead Agency must offer certificates for services funded under 45 CFR 98.50. (98.30) Certificates must permit parents to choose from a variety of child care categories, including center-based care, group home care, family child care and in-home care. (§98.30(e))

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

- () No.
 (X) Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

Parents identified for targeted, high risk services have access to child care through contracts with community based programs. These contracts do not pay for slots; rather, the providers bill the lead agency for services provided. Targeted populations include: a) parents engaged in migrant and seasonal farmwork; b) teen parents enrolled in high school completion programs; c) parents participating in state-approved substance abuse treatment; and, d) children with disabilities who need access to child care.

Application for services is processed by intake workers at program sites. Eligibility for child care is determined immediately upon parent admission. Point of entry to point of eligibility does not exceed five working days. Parents requesting their own choice of care may receive a certificate to purchase another option.

The lead agency also provides CCDF funds through DHS for full-day, full-year Head Start slots. These slots are available in a full range of child care options, including centers and family child care homes.

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

- (X) No.
 () Yes, and the limits and the reasons for those limits are (§§98.16(g)(2), 98.30(e)(1)(iv)):

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3.1.3 Are all of the child care services described in 3.1.1 above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))

(X) Yes

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

Section 3.2 - Payment Rates for the Provision of Child Care

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care. These rates are provided as Attachment D. The attached payment rates are effective as of July 1 2003.

The following is 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 are provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

- **The month and year when the local market rate survey(s) was completed: September 2002. (§98.43(b)(2)) A copy of the Market Rate Survey and the results of the survey are provided as Attachment B.**
- **How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))**

Payment rates are determined by the Oregon Legislature through the budget process and, based on the Market Rate survey, are at approximately the 25th percentile. The Department of Human Services continues to submit budget requests to address affordability and equal access for parents receiving the child care subsidy. Oregon has chosen to serve all families that are eligible and does not have a waiting list.

- **Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))**

Oregon policies support a strong child care resource and referral system that educates and encourages families to make informed choices and helps them access child care that meets their needs.

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- If the payment rates do not reflect individual rates for the full range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents.

Not applicable: Oregon has a full range of payment rates depending on the type of care chosen by the parent.

Section 3.3 - Eligibility Criteria for Child Care

By statute, all eligible children must be under the age of 13, or under age 19 if physically or mentally incapable of self-care, or under court supervision, and reside with a family whose income does not exceed 85% of the State Median Income (SMI) for a family of the same size and whose parent(s) are working or attending a job training or educational program or who receive or need to receive protective services. (658E(c)(3)(B), 658P(3), §98.20(a))

3.3.1 Complete column (a) in the matrix below. Complete Column (b) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the SMI.

IF APPLICABLE

Family Size	(a) 85% of State Median Income (SMI) (\$/month)	(b) Income Level, lower than 85% of SMI, if used to limit eligibility	
		\$/month	% of SMI
1	Not applicable	N/A	N/A
2	\$2,829	\$1,515	45.5%
3	\$3,495	\$1,908	46.4%
4	\$4,161	\$2,300	46.9%
5	\$4,826	\$2,693	47.4%

NOTE: Income levels in (b) are based on 150% of 2002 Federal Poverty Level.

The Lead Agency uses the State Median Income (SMI) of the year 2003 (\$58,737).

The co-payment calculator used by Children, Adult and Families may be accessed at: <http://www.caf.hr.state.or.us/ChildCare.html>. Click on "Child Care Co-Payment Calculator."

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Targeted population families with incomes at or below levels reported in column (b) may be eligible for fully subsidized child care through the Lead Agency.

- 3.3.2 How does the Lead Agency define “income” for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as Attachment_____ . (§§98.16(g)(5), 98.20(b))**

Countable income includes all income received by immediate family members living in the household except transfer income or earned income of children. There are no income deductions.

- 3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))**

- (X) No
 () Yes, and the additional eligibility criteria are: (Terms must be defined in Appendix 2)

There is no copay requirement for families receiving TANF.

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

- (X) Not Applicable, CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
 () No
 () Yes

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

- () No

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(X) Yes, and the upper age is 17.

3.3.6 Does the Lead Agency allow 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))

(X) No

() Yes, and the upper age is 17.

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

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

(X) No, however, the State of Oregon chooses to provide child care to children in foster care whose foster care parents are working, or who are in education/training activities.

Payments to working foster care parents are allowed under Oregon's definition, but current funding levels do not allow services to this population. If additional funds become available, Oregon would serve this population if the statewide Childhood Care and Education Coordinating Council approves funding this population as a priority.

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

() Yes

(X) No. Current funding levels do not allow services to this population. If additional funds become available, Oregon would serve this population if the statewide Childhood Care and Education Coordinating Council approves funding for this population as a priority.

Section 3.4 Priorities for Children

3.4.1 The following describes the priorities for serving CCDF-eligible children including how statutorily required priority is given to children of families with very low family income and children with special needs: (Terms must be defined in Appendix 2) (658E(c)(3)(B))

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Children eligible for services are listed and defined in the Appendix section. Targeted high-risk populations served by the Lead Agency include children of teen parents, children of migrant and seasonal farm workers, children of parents in state approved and women specific substance abuse treatment programs, children with special needs, and children from families with very low incomes.

The Department of Human Services subsidy program serves children from income-eligible families. Additionally, children with special needs can receive a supplemental reimbursement based on an individual needs assessment.

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

The primary goal is to help families achieve self-sufficiency through safe, dependable child care. Child care is available through the subsidy agency for families who:

- a) Receive TANF benefits and become employed, both while they remain on TANF and as a transition benefit when they are not longer eligible for TANF;
- b) Are participating in JOBS activities to become self-sufficient; or
- c) Are at risk of becoming dependent on TANF benefits.

3.4.3 The following describes how the Lead Agency addresses situations in which funding is not sufficient to serve all families that are technically eligible under State policies:

The state serves all families eligible under state policies for the ERDC program. Targeted populations (migrant families, teen parents, parents in substance abuse, and children with special needs) are served through community-based programs on a first come – first served basis.

Section 3.5 - Sliding Fee Scale for Child Care Services

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

The attached fee scale is effective as of March 1, 2003

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

- (X) No.
 () Yes, and the following describes any additional factors that will be used to determine a family's contribution including, but not limited to, a maximum amount (family cap), number of children in care, cost of care, and/or whether care is full or part-time:

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

- (X) Yes
 () No, and other scale(s) are provided as Attachment _____.

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: \$15,260

The Lead Agency must elect 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.
 (X) SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. A description of these families is:

High-risk targeted populations, families receiving TANF benefits, JOBS participants, and families receiving child care as a part of Head Start services.

3.5.4 Does the Lead Agency have a policy that prohibits child care providers from charging families any unsubsidized portion of the providers' normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))

- (X) No.
 () Yes, please describe:

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Providers can bill parents for the difference between the Department of Human Services maximum subsidy payment and the provider's usual charge.

3.5.5 The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

The sliding fee scale is based on income and size of the family. Copayments are waived for families enrolled in the TANF program who require child care subsidy to participate in employment or JOBS program activities. Families eligible for the Employment Related Day Care program and earning less than 100 percent of Federal Poverty Level (for their family size) are responsible for a copayment that is ten percent or less of their incomes. Those families earning more than 100 percent of Federal Poverty Level are responsible for a co-pay that is between 13-29 percent of their income (depending on family size).

Section 3.6 - Certificate Payment System

A child care certificate means a certificate, check, or other disbursement that is issued by the Lead Agency directly to a parent who may use it only to pay for child care services from a variety of providers (including center-based, group home, family and in-home child care), or, if required, as a deposit for services. (658E(c)(2)(A)), 658P(2), §§98.2, 98.16(k), 98.30(c)(3) & (e)(1))

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

3.6.1 A description of the form of the certificate: (§98.16(k))

Parents receive a "certificate of eligibility" in the form of a computer generated notice when eligibility is determined.

3.6.2 A description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to the choice of provider: (658E(c)(2)(A)(iii), 658P(2), §§98.2, 98.30(c)(4) & (e)(1) & (2))

Typically, a family has already chosen a provider by the time it applies for the child care subsidy. If not, consumer education services are provided that emphasize the right of parental choice and how to choose providers who understand and employ appropriate health, safety and quality program practices. Once eligibility is established, a child care billing form is issued to the provider chosen by the family.

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3.6.3 If the Lead Agency is also providing child care services through grants and contracts, explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b))

At the time of application and intake, parents are informed they may choose the option of a certificate (voucher) to purchase child care. If a parent selects this option, the Lead Agency enters into contracts with the provider of choice. The Department of Human Services requires the provider of choice to become listed and issues payments directly to the provider. The majority of parents choose the certificate program. In FFY 2002, the certificate option was selected by parents for child care services for approximately 46,177 children. This is almost 95 percent of all child care services funded by the CCDF in Oregon.

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PART 4 - PROCESSES WITH PARENTS

4.1 The following describes 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)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:

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

The subsidy agency contracts with the Child Care Resource and Referral (CCR&R) agencies throughout the State to provide consumer information and education about Oregon's child care programs. Families who may be eligible for a child care subsidy are referred to Department of Human Services field offices. Applications may be requested by phone and are also accepted by mail. When a complete application is received, eligibility is usually determined within five to ten days. Eligibility must be determined within 45 days from the date of request for assistance.

A family's eligibility, once approved, begins with the month in which assistance was requested. Parents receive assistance in selecting a child care provider if they do not already have one. A provider listing form is given to the parent(s) to be completed by the provider of choice. If the provider meets initial health and safety requirements, he/she is listed on the subsidy agency's provider payment system, and a criminal and child abuse records check is completed. The payment system issues the initial and subsequent billing forms directly to the provider.

Parents who receive TANF benefits are informed about the exception as described in 4.4 below.

The length of client eligibility varies depending on the benefit program and stability of family income. Redetermination of client eligibility is required periodically, generally every three to six months. If the child is enrolled in a contracted Head Start collaboration program, eligibility may extend to the end of the Head Start program year.

Targeted Services: Parents involved in a high risk population program are informed of the availability of child care through designated programs and assisted by program staff in

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determining the type of care most appropriate for their situation. The application for child care is available to parents participating in targeted programs described in Section 3.4 and processed on-site by an intake worker.

Eligibility for child care is determined immediately upon parent admission to the targeted population program. Under most circumstances, point of entry to point of eligibility does not exceed five days. The length of eligibility varies depending on the targeted population program and stability of family income. Redetermination of eligibility is required every six to twelve months.

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

The Lead Agency investigates all serious complaints received against child care providers. Subject to confidentiality laws, complaint dispositions are open public records. The Lead Agency maintains a file of program and provider complaint information that is available to the public upon request.

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

Parental access provisions are included in all Lead Agency provider agreements and subsidy agency listing agreements. Licensure laws for providers ensure that parents have unlimited access to their children.

4.4 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: Department of Human Services .

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- The ~~TANF~~ program is governed by a federal waiver agreement called the Oregon Option. This agreement eliminates the usual TANF exceptions. Instead, the Department of Human Services case manager works with the parent to find child care. Finding child care that meets the parent's and child's needs is a JOBS activity. Until adequate care is found, the client is not expected to participate in other JOBS activities and would, therefore, not be subject to a work requirement penalty. (This paragraph may be permanently deleted or amended after June 30, 2003).
- "appropriate child care": (a) both the provider and the place where care is provided meet the subsidy agency's health and safety and provider requirements defined in administrative rules; (b) the care accommodates the parent's work schedule; and (c) the care meets the specific needs of the child, such as age and special needs requirements.
 - "reasonable distance": the parent's total travel time from home to the child care provider and the workplace or JOBS activity will be no more than one hour either way unless a longer commute time is customary in the community.
 - "unsuitability of informal child care": The Department of Human Services uses the same standards for informal care as for regulated care. Care that does not meet the criteria in "appropriate child care" would be considered unsuitable.
 - "affordable child care arrangements": are those where the expense to the parent is less than ten percent of family income.

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**PART 5 - ACTIVITIES & SERVICES TO IMPROVE
THE QUALITY AND AVAILABILITY OF CHILD CARE****5.1 - Quality Earmarks and Set-Asides**

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; and describes the expected results of the activities.

Infants and toddlers:

Child Care Resource and Referral System: Increasing the supply of hard-to-find child care through specialized recruitment and training activities is a high priority for Oregon's CCR&R system. A large share of this effort is directed toward infant/toddler care.

Oregon Child Care Resource and Referral Network: Offers to providers First by Five Infant and Toddler training on emotional, social and cognitive development of infants and toddlers.

Portland State University: The Center for Career Development in Childhood Care and Education (a) administers a provider mentoring program to strengthen the infrastructure of support to providers caring for infants and toddlers, and (b) provides supportive and refresher training services to trainers of the First-by-Five training

Commission on Children and Families: Each county commission implements activities based on best or promising practices that will improve the supply and availability of care for infants and toddlers. These activities are based on the Community Comprehensive Plan from each county, which include information on quality care and assistance to communities to increase and stabilize care.

Child Care Division: The Lead Agency is responsible for activities related to issues of licensing and registration of providers caring for infants and toddlers.

Resource and referral services:

Oregon Child Care Resource and Referral Network (OCCRRN): Provides technical assistance, training and coordination activities to Oregon's seventeen (17) local resource and referral organizations.

Child Care and Development Funds are contracted to the OCCRRN to use for start-up, expansion, and operation of core services to parents, providers, communities, and

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employers. Parents receive consumer education designed to help them select and manage quality child care arrangements. The local CCR&R agencies help improve the availability and quality of child care through recruitment, training, and support of providers. The OCCRRN is responsible for collecting data on demand, supply and quality to assist the State in developing additional resources and referral services.

School-age child care:

The School Age Care, Enrichment and Recreation program at Portland State University receives CCDF funds earmarked for school age care programs. The focus of this activity is to improve the availability and quality of school age child care in Oregon. The project provides assistance to community programs through training and technical assistance and strives to improve coordination between local programs providing before- and after-school activities.

Examples of project activities include a partnership with the State of Washington to create and provide a 20-hour training for new after-school administrators; development of a literacy curriculum for practitioners; and, provision of technical assistance to Oregon's 21st Century Community Learning Center administrators and grantees. The project also coordinates with the state's integrated professional development activities and statewide Mentoring Program, which includes several mentors who are school-age specialists.

- 5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51, 98.16(h)). The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds):**

\$ 5,250,888 (4 %)

- 5.1.3 Check either "Yes" or "No" for each activity listed to indicate the activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658E(c)(3)(B), §§98.13(a), 98.16(h))**

Yes No

- ___ Comprehensive consumer education;
- ___ Grants or loans to providers to assist in meeting State and local standards;
- ___ Improving the monitoring of compliance with licensing and regulatory requirements;
- ___ Professional development, including training, education, and technical assistance;

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- ___ Improving salaries and other compensation for child care providers;
- ___ Activities in support of early language, literacy, and numeracy development; (Guidelines are in development – refer to Section 5.2.1)
- ___ Activities to promote inclusive child care;
- ___ Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children;
- ___ Other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1) and (2))

5.1.4 Describe each activity that is checked "Yes" above, identify the entity(ies) providing the activity, and describe the expected results of the activity.

Comprehensive Consumer Education

In FFY 2002, more than 45,600 families received consumer education services in Oregon. Direct services were provided through a statewide system of child care resource and referral sites and through subsidy agency field offices. In addition, other agencies, including the Oregon Commission on Children and Families, Oregon Department of Education, Oregon Health Division, and Oregon State Library, were instrumental in the development and distribution of consumer education materials statewide through their local constituent agencies and other networks (e.g., Healthy Start programs and pediatricians). These materials included parent resources on the importance of quality care and how to find it as well as how to promote healthy early brain development.

During this plan period, the CCR&R system will continue to deliver comprehensive consumer education services. Families receiving services will be offered information about categories of care, rates for care, what to look for in selecting quality care, names and locations of providers, histories of inspections and licensing, and educational consultations and referrals. Other agencies (e.g., those listed above) will continue to develop and disseminate informational materials. In addition, a new public information campaign has been developed focusing on informing employers about the importance of child care to the workforce and how Oregon's employer tax credits can help offset expenses.

Grants for Improving Standards and Supply

- a) The Commission on Children and Families will receive CCDF funds to stabilize supply and increase the availability of quality child care through grants to counties, thereby meeting local and statewide standards for child care availability. Allocations to county commissions will be based on 0-12 population with a minimum allocation available to all areas.

While the overall goal of this project is to increase supply of care, considerable flexibility is given to meet local needs as long as the emphasis focuses on low income working parents and student parents. Allowable uses of federal funds will be for

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grants to providers for start-up; ongoing operation and training; and grants to CCR&Rs to assist with their core mission. Use of CCDF funds to purchase child care slots is not allowed.

The emphasis of grants to counties will be placed on infant and toddler, school age, non-traditional care, sick child, specials needs, and extended care linked with Head Start or Oregon Pre-K. Counties are required to use funds to address capacity in these areas unless their plans demonstrate that these needs are adequately addressed and that a greater need exists for other child care programs.

Counties will further demonstrate efforts to make child care affordable and accessible to various income levels, as well as to ethnically and culturally diverse groups, and to families with children who have special needs. In developing fund plans, counties are encouraged to show collaboration with CCR&Rs, Head Start, Pre-K, providers, school districts, community colleges, and extension services. Joint or linked proposals between counties within the same CCR&R service area are also encouraged.

- b) The Department of Education will receive CCDF monies to assist school districts in starting and operating on-campus child development centers for preschool children and for centers serving the children of teen parents. On-campus centers will help increase the availability of child care supply in communities and serve as training sites for modeling appropriate child care. Campus-based child development centers must demonstrate the need for child care through consultation with the local CCR&R and are designed to accommodate the needs of low income working parents and student parents. Use of CCDF monies to purchase child care slots is not allowed.

Mentoring and Regulation

The Child Care Division uses CCDF funds to improve compliance with state licensing and registration laws. Responsibilities include: certification and registration activities, on-site review of all providers, investigation of all serious complaints, technical assistance to providers in meeting standards, improvement of infant/toddler care, and work on collaborative projects to build awareness and commitment to quality child care.

Training, Education and Technical Assistance

The Center for Career Development in Childhood Care and Education (Center) at Portland State University receives CCDF monies for training, education, and career development services. The Center will provide training materials and “train the trainers” for the Child Care Health and Safety and Child Care Social and Emotional training programs. The Center will also maintain the Professional Development Registry and provider mentoring project.

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Early language, literacy, pre-reading and numeracy components are included in the First by Five/Infant and Toddler and Child Care Social and Emotional training, as well as, the Statewide Mentoring program for child care providers. Guidelines for these activities as part of the Good Start, Grow Smart initiative are still in development.

Salaries and Compensation for Providers

Oregon is committed to building a quality child care system which includes appropriate compensation for providers and affordability to parents. Market rates will be adjusted as funds are available to reflect the most recent survey data in order to maintain stability of the system and accessibility to care. Current reimbursement rates to providers are identified in Attachment D. The subsidy agency has developed a tiered reimbursement system to compensate informal providers for obtaining the same training required of registered providers. CCDF funds have been used to develop Oregon Cares, a pilot project underway in several counties, to compensate providers based on professional development. We hope to decrease turnover and improve overall quality by tying training to additional compensation.

Other Quality Activities

The CCD will use CCDF monies to revise the State-developed child care provider training curriculum. The first module, Child Care Health and Safety, has been completed and trainers trained. The second module, Social and Emotional Development, is underway.

5.1.5 Is any entity identified in sections 5.1.1 or 5.1.4 a non-governmental entity?

No.

Yes, the following entities named in this part are non-governmental:

Name: Oregon Child Care Resource and Referral Network

Type: (~~government~~/private non-profit/~~private for profit~~)

5.2 - Good Start, Grow Smart Planning and Development

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

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5.2.1 - Voluntary Guidelines for Early Learning

- **Indicate which of the following best describes the current status of the State's efforts to develop research-based early learning guidelines (content standards) regarding language, literacy, pre-reading, and numeracy for three to five year-olds:**

- a) ___ Preliminary thinking or planning.
- b) X Guidelines are being developed.
- c) ___ Guidelines are developed but need to be modified.
- d) ___ Guidelines are developed and implementation is in progress.
- e) ___ Guidelines are developed and implemented in pre-kindergarten programs but not in child care.
- f) ___ Guidelines are developed and implemented.
- g) ___ Other. Please describe:

The State of Oregon is at level (b).

- **Describe the process that was used or is planned for developing the State's early learning guidelines. Indicate who or what entity provided (or is providing leadership) to the process as well as the stakeholders involved. Was (or is) the process framed by State legislation, research and/or guiding principles? If so, please describe. How are (or will) the early learning guidelines and the State's K-12 educational standards aligned? If they are not aligned, what steps will be taken to align them? If the early learning guidelines are in development, what is the expected date of completion?**

The Oregon Department of Education's (ODE) Office of Student Services (Early Childhood Education) and Office of Special Education (Early Intervention/Early Childhood Special Education) began the process of aligning pre-kindergarten child outcomes with the ODE Common Curriculum Goals and Content Standards in December 2001. An internal draft document has been developed. The process has been delayed due to various state issues, both external and internal. Please see the attached document titled, "Building A Solid Foundation For Learning For All Children" for answers to the above questions.

The ODE will be the state lead for the recent Good Start Grow Smart initiative that requires state Voluntary Guidelines. The current work of ODE will be integrated into the *Good Start, Grow Smart initiative*. An initial meeting of Child Care representatives with ODE staff occurred on March 27, 2003 to review the materials developed to date and to develop a process to move forward toward Voluntary Guidelines. The expectation is that a time-line, partner involvement and implementation will be discussed and developed at this time with work to continue throughout the next year.

- **Describe the domains of development that the early learning guidelines address or are expected to address, e.g., social, emotional, cognitive, linguistic, and physical. States**

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that have completed early learning guidelines should include a copy as an appendix to the plan. If the guidelines are available on the web, provide the appropriate website address.

Please see Attachment E to this document.

- Describe the process the State used or expects to use in implementing its early learning guidelines, e.g., feedback and input processes, dissemination, piloting, training in the use of the guidelines, and linkages with other initiatives such as incentives for provider education and training. To what extent is (or was) implementation anticipated in the development of the guidelines? To which child care settings do (or will) the guidelines apply and are the guidelines voluntary or mandatory for each of these settings? How are (or will) community, cultural, linguistic and individual variations, as well as the diversity of child care settings (be) acknowledged in implementation?

The State of Oregon has not yet developed implementation plans.

- As applicable, describe the State's plan for assessing its early learning guidelines. What will be the focus of the evaluation, i.e., guideline development and implementation, programs or child care settings, and/or outcomes related to children? Will young children's progress be evaluated based on the guidelines? How will assessment be used to improve the State's guidelines, child care programs, plans and outcomes for individual children?

The State of Oregon has not yet developed assessment tools.

Section 5.2.2 - State Plans for Professional Development

- Describe the provider training, technical assistance, and professional development opportunities that are available to child care providers. Are these opportunities available Statewide to all types of providers? If not, please describe.

Training

Statewide CCDF-supported training initiatives prioritized for Family Child Care (FCC) and Center-Based care:

- Oregon Child Care Health and Safety (5 modules @ 2 hour /module correlated to State PDR standards)
- Oregon Child Care Social and Emotional Development (in revision process- will parallel Oregon Child Care Health and Safety training)
- First by Five Infant and Toddler Development and Care (4 modules @ 10 hours/Module correlated to State Professional Development Registry (PDR) standards)

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- Recognizing and Reporting Child Abuse and Neglect (1 module @ 2 hours correlated to State PDR standards)
- Leading the Way School age Administrator training –20 hours of training and education correlated to State PDR standards
- School age-specific training at OAEYC and OSAC statewide conferences

Technical Assistance

- Statewide CCDF-supported technical assistance provided on an on-going basis to caregivers, families, employers, state agencies and local communities through the R&R system: Information and assistance about quality child care, child care choices, data for planning and policy making, community resources for families, accessibility, affordability, and supply, child development, parenting, health, safety, business, regulation,
- Statewide CCDF-supported technical assistance provided on an on-going basis to child care providers, youth workers, parents, communities, schools, local agencies, and state agencies through the SACER program: information and assistance about quality before and after school, youth and mixed age care, community resources, child and youth development, parenting, administration and regulation.

Professional Development Opportunities

- Statewide CCDF-supported Mentoring/Coaching Career Counseling provided to 400 to 500 child care mentees per year regarding professional development, working with children with special needs, administration, adult education, infant toddler, school age, English as a second language providers.
- Statewide CCDF-supported training, technical assistance, child outcomes assessments, early intervention, infant and toddler care, literacy, English as second language, direct child care program services provided to individual counties through the OCCF

• **Does the State have a child care provider professional development plan?**

- (X) Yes; if so, identify the entities involved in the development of the plan and whether the plan addresses all categories of providers. As applicable, describe: how the plan includes a continuum of training and education, including articulation from one type of training to the next; how the plan addresses training quality including processes for the approval of trainers and training curriculum; how the plan addresses early language, literacy, pre-reading, and numeracy development. Indicate whether the plan is linked to early learning guidelines and, if so, how.
- () No; if no, are steps under way to develop a plan? If so, describe the time frames for completion and/or implementation, steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and numeracy.

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The CCDF supported Statewide Oregon Career Development System coordinated through Center for Career Development in Childhood Care and Education at Portland State University, establishes the primary components of a provider professional development system:

- 1) Identification of the profession is the 10 constituent groups.
- 2) Identification of the age range is birth to school age including children with special needs in child care settings, which can include children through the age 18.
- 3) Definition of services includes childhood care and education: the caring for children (nurturing, meeting basic health and physical needs, etc.) and the education of children (cognitive development, language development, social development, etc.)
- 4) The identified common body of knowledge is the 12 core knowledge categories and the accompanying 72 knowledge standards (six levels of knowledge for each of 12 core knowledge categories for 72 knowledge standards)
- 5) Identified professional practices to promote independent decision-making based upon the body of knowledge are reflective experience and professional action.
- 6) Identified professional guides are personal attributes, and, in process to include, the NAEYC ethical standards.
- 7) The identified way to enter the field and to progress through the field is the career lattice or PDR. The PDR promotes multiple pathways and is inclusive of not-for-credit training and education, for-credit training and education, undergraduate and graduate degrees, CDA credential. State CCD certified registered, and DHS listed providers may use the PDR as an optional method of meeting provider requirements.
- 8) The previously mentioned CCDF-supported statewide training initiatives and statewide mentoring/coaching/career counseling program provide a few of the many pathways to acquire the knowledge.
- 9) The identified trainer/training review and approval system linked to the PDR is the OCCET program which shares the 12 core knowledge categories, the 72 standards, and the professional practice for both individual trainers and specific training sessions.
- 10) The standards for professional knowledge are established in the PDR, mentioned above.
- 11) The standards for professional application of that knowledge are established in the State Childhood Care and Education Essential Elements of Programs for Children. This framework includes 9 fundamental essential elements, 32 high quality specific standards, and 195 observable and measurable indicators.
- 12) The Professional knowledge standards (PDR) and the professional application standards (Essential Elements) are linked and complementary.

Early language, literacy, pre-reading and numeracy has not been specifically identified in a statewide CCDF-supported plan or program implementation. These components are included in the First by Five, Infant and Toddler, Child Care Social and Emotional training, as well as, the Statewide Mentoring program.

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- **Are program or provider-level incentives offered to encourage provider training and education? If yes, please describe. Include any links between the incentives and training relating to early language, literacy, pre-reading, and numeracy.**
 - 1) The Department of Human Services provides a tiered reimbursement system of seven (7) percent incremental payment to child care providers tied to attainment of training and education consistent with CCD certification and registration and linked to the PDR Entry Level standards.
 - 2) The CCDF-supported activities of the Oregon Commission on Children and Families coordinate local county variations of Oregon CARES initiatives providing direct incentives/compensation/stipends for providers achieving levels of professional development consistent with the PDR.
 - 3) The private sector Oregon Community Foundation through the OCCD at PSU funds Statewide Scholarship programs tied to education and training leading to and the attainment of certification (PDR), credentialing (CDA), and accreditation [National Association of Family Child Care (NAFCC), National Association for the Education of Young Children (NAEYC), National School Age Care Association NSACA)].

 - **What are the expected outcomes of the State's professional development plan and efforts to improve the skills of child care providers? As applicable, how does (or will) the State assess the effectiveness of its plan and efforts? If so, how does (or will) the State use assessment to help shape its professional development plan and training/education for child care providers?**
 - 1) The Training Quality Committee (TQC) of the Child Care and Education Coordinating Council reviews the CCDF-supported professional development programs and activities.
 - 2) The TQC has an established work plan that consists of 19 objectives. The objectives specifically review broad based partner communication and collaboration, training and professional development opportunity information dissemination, trainer standards, training session standards, mentoring services, articulation, credit for life experience, and the professional development registry.
 - 3) TQC objectives reflect the need to both engage and be appropriate to culturally and linguistically diverse and special needs populations.
 - 4) TQC objectives contain annual evaluation: Was the objective accomplished? Was the process followed in a timely manner? Were outcomes effective? What are the recommended strengths/gaps/changes? Were adaptations made based on the annual and/or ongoing reviews?
 - 5) TQC objectives are tied to the six (6) Child Care Division performance measures and the four (4) Oregon Progress Board child care related State of Oregon Benchmarks.
 - 6) The increase in the knowledge and skills of the child care provider provides an increase in quality of child care services which increases quality of the child's development and which also increases the benefit to the individual child, family and community

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Section 5.2.3 - State Plan for Program Coordination

- **Does the State have a plan for coordination across early childhood programs? If so, is there an entity that is responsible for ensuring that such coordination occurs? Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination. If no, what steps are under way to develop a plan for coordination?**

Oregon has three levels of program coordination:

- 1) *Early childhood intervention programs*: The Oregon Children's Plan describes coordination of an early childhood system of services. The responsibility is jointly shared by the Oregon Commission on Children and Families, Oregon Department of Education, and Department of Human Services. The plan brings together all prevention and early intervention programs including federal Head Start and state Pre-K, Title I, IDEA, Healthy Start, State Office of Family Health, Mental Health Services, Child Care, and a broad range of community-based services. The Oregon Children's Plan focuses on development of local voluntary early childhood systems of services. Counties are developing a process to identify families who may benefit from services and a plan to support the identified needs through screening, assessment, and coordinated service delivery.
 - 2) *Child care programs and initiatives* are coordinated through the Childhood Care and Education Coordinating Council (CCECC). The Council is advisory to the Child Care Division, lead agency for the CCDF. With representation from all state agencies involved in child care and early education, advocates, and parents, the CCECC is responsible for development of the CCDF plan and coordination of state level initiatives and projects related to child care.
 - 3) *Child care policy recommendations* are coordinated through the Oregon Commission for Child Care. The Commission is comprised of 18 members appointed by the Governor and legislative leadership to advise on policy and legislation required to implement a comprehensive, collaborative system of care.
- **Describe the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.**

These three bodies work collaboratively to ensure a coordinated system of services is available to all children. The CCECC has committees that focus on specific child care initiatives including professional development, inclusion, public information, and research and data. A separate committee has been established to examine outcomes for children in child care. The outcomes developed will be coordinated with Pre-K outcomes and integrated

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with K-12 outcomes. Oregon's early learning guidelines are the nine Essential Elements of Programs for Children. The objective of the Essential Elements is to describe the components of quality necessary for a coordinated and collaborative childhood care and education system.

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

The Oregon Children's Plan is mandated in statute (ORS 417.705 - 825) and is supported by a state Early Childhood Team (ECT). The ECT has approved an annual work plan with focus areas on communication, system implementation, training and technical assistance, quality assurance standards, data and system evaluation, and financing. It is unknown at this time whether there will be changes in the plan.

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PART 6 - HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(ONLY THE 50 STATES AND THE DISTRICT OF COLUMBIA COMPLETE PART 6.
ONLY TERRITORIES COMPLETE PART 7.)

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

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

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

- YES, answer 6.1.2 and proceed to 6.2.
 NO, 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))

- NO
 YES, and the changes are as follows:

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

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

Center-based providers deliver child care through standards that are comparable to certified centers. Providers must comply with state health requirements for age appropriate immunizations and follow control procedures in the event of a communicable disease outbreak.

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- **Building and physical premises safety**

Facility standards are similar to certified center care and must be in compliance with state and local safety codes. See listing rules in Attachment F.

- **Health and safety training**

To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing Child Abuse and Neglect training. All providers are also encouraged to participate in First by Five, Infant and Toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.

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

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

- (X) YES, answer 6.2.2 and proceed to 6.3.
 () NO, answer 6.2.2 and 6.2.3.

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

- () NO
 (X) YES, and the changes are as follows:

Group Homes are now called Certified Family Child Care Homes. There is only one group size; maximum number of children in care remains at 12. The staff/child ratios have been changed for mixed age groups, but not for same age groups. The CCD now allows Certified Family Homes to care for the same configuration of ages of children for which a Registered Family Home can care. There is no change in the 15 hours/year of training required; in addition, a certified family provider must now meet the same requirements (first aid, CPR, food handler's certification and two hours of child abuse and neglect training) as a registered provider before being certified.

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6.2.3 For that 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:

There are no exempt group homes in Oregon.

Section 6.3 - Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))**6.3.1 Are all family child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:**

- YES, answer 6.3.2 and proceed to 6.4.
 NO, answer 6.3.2 and 6.3.3.

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))

- NO
 YES, and the changes are as follows:

Child Care Division: “Providers are required to attend both pre-registration (child abuse and neglect training, first-aid, CPR, and food handler certification) and on-going training (8 hours in the two-year registration period on child care related topics) during registration.”

Department of Human Services – Enhanced Provider Program: Subsidized providers receive a 7 percent increased subsidy when they meet the training requirement set by the Child Care Division. Providers are encouraged to participate in Child Care Health and Safety training coordinated through the Oregon Child Care Resource and Referral Network. All providers are also encouraged to participate in First by Five, Infant and Toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective service records.

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

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

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Oregon Administrative Rules govern requirements for listed providers. This is further referenced in Attachment F. Effective July 1, 1999, the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).

- **Building and physical premises safety:** See Attachment F
- **Health and safety training:** See Attachment F

To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing Child Abuse and Neglect training. All providers are also encouraged to participate in First by Five, Infant and Toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.

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

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

- () YES, answer 6.4.2 and proceed to 6.5.
 (X) NO, answer 6.4.2 and 6.4.3.

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))

- (X) NO
 () YES, and the changes are as follows:

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

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

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- See Attachment F. Effective July 1, 1999, the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).

- **Building and physical premises safety:** See Attachment F
- **Health and safety training:** See Attachment F

To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing Child Abuse and Neglect training. All providers are also encouraged to participate in First by Five, Infant and Toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.

Section 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:

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

Section 6.6 - Enforcement of Health and Safety Requirements

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

- Are child care providers subject to routine unannounced visits (i.e., not specifically for the purpose of complaint investigation or issuance/renewal of a license)?
 - () No

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(X) Yes, and the following indicates the providers subject to routine unannounced visits and the frequency of those visits.

Center and certified family homes are subject to annual unannounced monitoring visits. Family child care providers receive unannounced visits to investigate serious complaints.

- **Are child care providers subject to background checks?**

() No

(X) Yes, and the following types of providers are subject to background checks (indicate when such checks are conducted):

All registered, certified, and subsidized providers are subject to background checks prior to state approval.

- **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.)**

() No

(X) Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable).

All injuries that occur in regulated child care that require third-party medical attention must be reported to the Child Care Division. The Child Care Division maintains a database to track the number and nature of the injuries.

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

1) All persons who wish to work in licensed child care in Oregon must first be enrolled in the Criminal History Registry. In order to be enrolled, an individual must pass a background check that includes state criminal history and child protective services check. FBI checks are required for applicants who have lived out of state during the previous 18 months, or whose state check indicates a multi-state offender. Registry Enrollment must be renewed every two years. The state checks police records on a quarterly basis for any additional convictions by the provider or household members.

2) Center-based care – Zoning, Health Dept., Sanitation Inspection, and Occupancy, and Building Codes apply.

3) Certified family homes - Oregon Department of Health Sanitation rules apply. Non-occupied same as center rules/regulations.

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Section 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.

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APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS

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

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

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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))

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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))

- (1) *job training and educational program* - A job training program is one that includes technical or vocational courses leading to an occupation or employment, and other job training activities which lead to employment. An educational program is an accredited program which leads to an academic diploma, degree or certificate and has reasonable employment opportunity. A licensed substance abuse program shall be considered an educational program for eligibility purposes.
- (2) *attending* (a job training or educational program; include minimum hours if applicable) - Satisfactory participation in a job training or educational program that requires absence from the child on a part time or full time basis. Authorized care will be for reasonable hours of care needed to support participation in the program, including meal and commute time. Care may be authorized for gaps up to two weeks between or before scheduled program or activities, if necessary to keep the provider.
- (3) *in loco parentis* - In place of the parent; may include, but is not limited to, a step parent, guardian, or legal guardian.
- (4) *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) - See specials needs definition (#7)
- (5) *protective services* - Children who have either experienced abuse or neglect or are at risk of abuse or neglect as a result of their parent/primary caregiver's use and/or abuse of alcohol or other drugs. A child is determined eligible by virtue of the parent's eligibility for treatment. Also, a child in the custody of the State Office for Children and Families will be eligible for child care. A foster parent must be working or attending an education or training program.
- (6) *residing with* - Children shall reside with a parent, who is the person responsible for the care, control and supervision of the child. Parent means a parent by blood, marriage or adoption, legal guardian, or other person standing in loco parentis.
- (7) *special needs child* - A child with disabilities under age 18 and who may require a level of care over and above the norm for his/her age due to a physical, developmental, mental, behavioral, or medical disability such as mental retardation, cerebral palsy, Down Syndrome, autism, serious emotional and behavioral disorders, attention deficit hyperactivity disorder, mental health disorders, hearing impairment, vision impairment, physical or mobility disabilities, serious chronic illness, brain injury and other

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disabilities. The higher level of care may include, but is not limited to, additional staffing, special medical procedures, adaptive equipment, structural or other types of accommodation. The disability may be verified by one of the following: 1) physician; nurse practitioner; licensed/certified psychologist or clinical social worker; 2) eligibility for early intervention/early childhood special education services or school-age special education services; or 3) eligibility for Supplemental Security Income (SSI).

- (8) *very low income* - 150% of Federal Poverty Level.
- (9) *working* (include minimum hours if applicable) - employment in an occupation which provides earned income and requires periodic absence from, or an inability to care for a dependent child. Earned income includes (a) compensation for services performed, (b) income from on-the-job training, or other paid work experience, (c) in-kind income in exchange for work performed, (d) income from self-employment, (e) flexible benefits that the employee has the option of taking in cash.
- (10) Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

Child of a teen parent - child care for parents under the age of 20 who are actively participating in a high school diploma or high school equivalency program.

Child of a parent in substance abuse treatment - child care for parents who are participating in state approved substance abuse treatment prior to reentry to the work force. The treatment service must include a recognized women's program.

Child of a parent in farm work - child care for parents employed in migrant and/or seasonal agriculture as defined by Oregon Administrative Rules.

Child of a post secondary student parent: child care for parents enrolled full time in vocational schools, community colleges, or institutions of higher education. Student-parents must demonstrate passing grades to maintain eligibility

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ATTACHMENT A

Notice is hereby given that Oregon’s Child Care Division will hold a hearing to provide opportunity for the public to comment on the draft of the 2004- 2005 State Child Care Plan. The draft plan was developed in coordination and consultation with state and local child care and early childhood agencies and advocates under provisions of the Federal Child Care and Development Fund (CCDF). The federal CCDF program assists the state in funding child care services and activities to improve the quality and availability of child care in Oregon. The hearing will be held on Tuesday, June 24, 2003, from 6-8 p.m. in the Employment Department auditorium, 875 Union Street NE, Salem. A copy of the draft plan may be obtained from Sonja Svenson, Child Care Division, P.O. Box 14050, Salem OR 97309-4050 or accessing the Child Care Division web site at <http://findit.emp.state.or.us/childcare.cfm>.

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ATTACHMENT B**Oregon Child Care Market Rate Study, 2002****Complete document is available at:**<http://www.dhs.state.or.us/children/publications/2002marketratestudy.pdf>**Executive Summary**

In 1990 the federal government began a major investment in child care with the passage of the *Act for Better Child Care*. This federal legislation created a new block grant program. Support of parental choice was a key component of this block grant program that sent new money to states to support child care. Parental choice and state control of policy remained central when the program was expanded in 1996 as part of welfare reform legislation. At that time, child care funding became known as the *Child Care and Development Fund*. Congress directed states to use federal funds to give parents access to care of their choosing. Based on household income, parents pay a family co-payment, a portion of the child care fee.

Congress further mandated that states conduct a study of current market rates every two years and determine the 75th percentile of rates, the rate level at which 75 percent of child care slots may be purchased. Congress encouraged states to ensure that state child care payments be high enough to give parents access to 75 percent of the child care slots in their communities. States are required to certify that a market rate study has been completed within the last two years. Further, states certify that they met the equal access provision by providing state subsidy payment vouchers to eligible families that allow those families access to the supply of child care in their community.

Purpose of the Market Rate Study

The 2002 Market Rate Study identifies child care prices or rates and the geographic distribution of these rates across the state. Rates vary by several factors including the age of child served, type of care (family child care, center, group home), the local supply and demand for child care, and providers' perceptions of the capacity of families to pay for care. The 2002 Oregon Market Rate Study examines geographic patterns in the rates charged by providers by age of child served, type of care, and reporting modes (hourly, monthly, etc). This study fulfills the federal requirement that the state complete a market rate survey every two years.

Data Source

Prior studies were completed in 1992, 1994, 1999, and 2000. As in past years, the local Child Care Resource and Referral (CCR&R) databases were used as the source of data. These databases are created when child care providers report their rates to local CCR&Rs who, in turn, use rate data to inform parents of provider charges as part of a referral process. The Oregon

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Child Care Resource and Referral Network (OCCRRN) compiles the data into a single database. In 1999, a sample of providers were pulled from the OCCRRN database and surveyed by phone. In 2002 (as in years other than 1999) the rate data from the OCCRRN database were analyzed. Rates charged by 5,145 family child care providers, 990 centers, and 173 group homes from every part of the state are included in the database used for the analysis.

Findings

Between 1994 and 2002 statewide rates increased for all ages and types of care. In family child care the hourly rate of toddler care increased 34 percent since 1994 while in center care the monthly rate increased 37 percent in the same time period.

Child care markets are local with variation within and between communities. When rates were analyzed by zip codes across Oregon, patterns around the state appeared. Urban areas and university communities have higher rates than do more rural communities in the state. Some zip codes areas have moved up or down in child care rates over time. As in past studies, however, child care rates fall into three clusters or areas. The map of 2002 Rate Areas graphically depicts how the rates vary across the state (See Map in Appendix E of Market Rate Study). These three rate areas capture three distinct sets of rates regardless of type of care or age of child served.

Current market rates are substantially greater than either the enhanced or standard maximum subsidy rates set by the state of Oregon. The current maximum rates paid for subsidy-eligible children were last updated in 1998. As authorized by the Oregon Legislature, in 1999 the Department of Human Services (DHS) introduced an enhanced rate for providers who meet the training standards required for licensure by the Child Care Division (CCD). These enhanced rates offer these providers an additional 7 percent over the standard subsidy rate.

The state maximum subsidy or payment rate affects parents' access to all types of child care in the community. The study explored access in two ways: (1) percent of slots statewide that can be purchased at the subsidy rate, and (2) percent of provider care by zip code that can be purchased at the subsidy rate.

The second measure was created to determine if the amount of access varied by geographic location. Findings include: In Oregon, current maximum enhanced rates are adequate to purchase approximately 24 percent of child care slots statewide. In much of Oregon, however, the provider prices of all market child care are greater than the maximum subsidy amount. In 40 percent of Oregon zip code areas that have rates, no family child care providers can be accessed at the maximum subsidy rates. In 61 percent of Oregon zip code areas that have rates, the maximum subsidy rates are not enough to purchase any center child care. In about a fifth of zip code areas families can purchase over 50 percent of child care in the community at the maximum subsidy rate.

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The DHS maximum rate includes both the amount families' pay in copay and the DHS child care subsidy amount. The value of a child care subsidy, when combined with the family copay, does not fully cover child care rates in the market in most parts of the state (See maps on pages 10-11 of the Study). Deeper colors designate geographic areas in which the maximum subsidy value is enough to cover the rates of few, if any, community child care providers. Examination of the maps indicates that this is a statewide phenomenon rather than one limited to urban areas.

Conclusions

- The geographic rate analysis identified three geographic market area boundaries that are generally similar to those identified in the previous market rate studies.
- DHS maximum enhanced subsidy rates are adequate to purchase approximately a quarter or less of market child care slots statewide.
- Geographically, in approximately half of zip code areas no market child care can be purchased at the DHS subsidy rate.
- CCR&R data continues to provide a reliable and cost-effective source of data for statewide market rate studies.
- Rates should continue to be reported for both child care providers and slots.
- Analysis should be based on slots since this most accurately represents what families experience when purchasing care.
- CCR&Rs should continue to collect rate information in the mode(s) that reflect how providers charge.

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(10) This section establishes the ERDC eligibility standard and the client's copayment (copay).

(a) The ERDC eligibility standard is 1.50 times the amount given in OAR 461-155-0225(2)(a), rounded down to the next whole number. The ERDC copay is \$43 or the amount determined by the formula in subsection (b) of this section, whichever is greater.

(b) The maximum copay equals the constant determined by the table in subsection (c) of this section, added to the product of a constant determined by the table in subsection (d) of this section times the constant determined by the table in subsection (e) of this section raised to a power equal to the family's gross income, expressed in dollars. The formula is as follows:

$$y = k + (b \times m^x)$$

(c) The constant k is determined by the number of people in the need group, as follows:

- (A) 2 persons: k = -12
- (B) 3 persons: k = -37
- (C) 4 persons: k = -32
- (D) 5 persons: k = -33
- (E) 6 persons: k = -62
- (F) 7 persons: k = -74
- (G) 8 or more persons: k = -85

(d) The constant b is determined by the number of people in the need group, as follows:

- (A) 2 persons: b = 18.0
- (B) 3 persons: b = 23.0

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- (C) 4 persons: $b = 20.9$
 - (D) 5 persons: $b = 20.6$
 - (E) 6 persons: $b = 33.2$
 - (F) 7 persons: $b = 33.2$
 - (G) 8 or more persons: $b = 40.4$
- (e) The constant m is determined by the number of people in the need group, as follows:
- (A) 2 persons: $m = 1.001885$
 - (B) 3 persons: $m = 1.001550$
 - (C) 4 persons: $m = 1.001380$
 - (D) 5 persons: $m = 1.001250$
 - (E) 6 persons: $m = 1.000990$
 - (F) 7 persons: $m = 1.000910$
 - (G) 8 or more persons: $m = 1.000795$
- (11) Copayment (copay) reduction benefit is limited as follows:
- (a) For the period March 1, 2000 through December 31, 2002, a client's copay is limited to \$25 each month during the first two consecutive months the client is eligible for ERDC. The copay reduction benefit cannot be applied more than two months in any 12 consecutive months.
 - (b) For a client who becomes eligible for ERDC in January 2003, the copay is limited to \$25 for January and \$43 for February 2003. This copay reduction benefit does not apply to clients who have received the benefit after January 2002.
 - (c) The copay reduction benefit described in this section does not apply to a client who becomes eligible for ERDC after January 2003.

Stat. Auth.: ORS 411.060

Stats. Implemented: ORS 411.060

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Co-pay Matrix 2003

Income	Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	Family of 7	Family of 8 or More
< 597	43	43	43	43	43	43	43
600	44	43	43	43	43	43	43
650	49	43	43	43	43	43	43
700	55	43	43	43	43	43	43
750	62	43	43	43	43	43	43
800	69	43	43	43	43	43	43
850	77	49	43	43	43	43	43
900	86	56	43	43	43	43	43
950	96	63	45	43	43	43	43
1,000	106	71	51	43	43	43	43
1,050	118	80	57	43	43	43	43
1,100	131	89	63	48	43	43	43
1,150	145	100	70	54	43	43	43
1,200	160	111	77	59	47	43	43
1,250	178	122	85	65	52	43	43
1,300	196	135	94	72	58	43	43
1,350	217	149	102	78	64	43	43
1,400	239	164	112	85	71	45	43
1,450	264	180	122	93	77	50	43
1,500	291	198	133	101	84	56	48
1,550		217	145	110	92	62	53
1,600		237	158	119	100	68	59
1,650		259	171	129	108	75	65
1,700		283	186	139	117	82	71
1,750		309	201	150	126	89	77
1,800		337	218	162	135	97	84
1,850		367	236	175	145	105	91
1,900		399	255	188	156	113	98
1,950			276	202	167	122	105
2,000			298	218	178	131	113
2,050			321	234	190	140	121
2,100			346	251	203	150	129
2,150			373	269	217	161	138
2,200			402	289	231	172	147
2,250			433	309	246	183	156
2,300			466	331	261	195	166
2,350				355	278	207	176
2,400				380	295	221	187
2,450				407	313	234	198
2,500				435	332	249	210

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Co-pay Matrix 2003

Income	Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	Family of 7	Family of 8 or More
2,550				465	352	264	222
2,600				497	373	279	234
2,650				531	395	296	247
2,700					418	313	260
2,750					443	331	274
2,800					468	350	289
2,850					495	370	304
2,900					523	390	320
2,950					553	412	336
3,000					584	434	353
3,050					617	458	371
3,100						483	390
3,150						509	409
3,200						536	429
3,250						564	450
3,300						594	471
3,350						625	494
3,400						658	517
3,450							542
3,500							567
3,550							594
3,600							621
3,650							650
3,700							679
3,750							710
3,800							743
3,850							776

To access the **ERDC Copayment Estimate Screen** on the Internet:

Go to www.dhs.state.or.us/children/childcare - using the index to the left, click on “Copay Estimate”. You will be asked the number of persons (in the family) and the monthly income.

The system will then calculate the co-payment or tell you that “the income exceeds eligibility for child care services”.

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ATTACHMENT D

OAR 461-155-0150

Child Care Eligibility Standard, **Payment Rates**, and Copayments

This rule covers child care in the ERDC, JOBS, JOBS Plus, OFSET, REF and TANF programs.

- (1) The following definitions apply to the child care rates:
 - (a) Infant: A child aged birth through 12 months.
 - (b) Toddler: A child aged 1 year through 30 months.
 - (c) Preschool Child: A child aged 31 months through 5 years.
 - (d) School Child: A child aged 6 years or older.
 - (e) Special Needs Child: A child who meets the age requirement of the program (ERDC or TANF) and who requires a level of care over and above the norm for his or her age due to a physical, behavioral or mental disability. The need for a higher level of care must be determined by the provider and the disability must be verified by one of the following:
 - (A) A physician, nurse practitioner, licensed or certified psychologist or clinical social worker.
 - (B) Eligibility for Early Intervention and Early Childhood Special Education Programs, or school-age Special Education Programs.
 - (C) Eligibility for SSI.
- (2) The following definitions apply to the types of care specified in the child care rate charts:
 - (a) The Standard Family Rate applies to child care provided in the provider's own home or in the home of the child when the provider does not qualify for the enhanced rate allowed by subsection (b) of this section.
 - (b) The Enhanced Family Rate applies to child care provided in the provider's own home or in the home of the child when the provider meets:

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- (A) The training requirements of the Professional Development Registry (PDR) entry level, established by the Oregon Center for Career Development in Childhood Care and Education; or
- (B) The training requirements established by the Child Care Division for registered family providers who apply to become registered after October 1, 1999.
- (c) The Enhanced Group Rate applies to child care provided in a residential dwelling that is certified by the Child Care Division as a Group Child Day Care Home. To earn this designation, the facility must be inspected, and both provider and facility are required to meet certain standards not required of a registered family provider.
- (d) The Standard Center Rate applies to child care provided in a facility that is not located in a residential dwelling and is exempt from Child Care Division Certification rules (see OAR 414-300-0000).
- (e) The Enhanced Center Rate applies to child care provided in a center that is certified by the Child Care Division or in an exempt center whose staff meet the training requirements of the PDR entry level established by the Oregon Center for Career Development in Childhood Care and Education. Eligibility to receive the enhanced center rate for care provided in an exempt center is subject to the following requirements:
- (A) A minimum of one staff member for every 20 children in care must meet the PDR entry level training requirements noted in section (2)(b)(A) of this rule.
- (B) New staff must meet the PDR entry level training requirements within 90 days of hire, if necessary to maintain the trained staff-to-children ratio described in paragraph (A) of this subsection.
- (C) There must be at least one person present when and where care is provided who has a current certificate in infant and child CPR and a current American Red Cross First Aid card or an equivalent.
- (f) An exempt center is eligible to receive the enhanced rate for a maximum of six months while in the process of meeting the requirements of section (2)(e) of this rule if it files a statement of intent to meet the requirements on a form prescribed by the Division.
- (g) An enhanced rate will become effective not later than the second month following the month in which the Division receives verification that the provider has met the requirements of section (2)(b), (c), (e) or (f) of this rule.

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- (3) Subject to the provisions in section (6) of this rule, the monthly limit for child care payments is the lesser of the amount charged by the provider or providers and the following amounts:
- (a) The monthly rate provided in section (6) of this rule.
 - (b) The product of the hours of care, limited by section (4) of this rule, multiplied by the hourly rate provided in section (6) of this rule.
- (4) The number of payable billable hours is limited as follows:
- (a) For the ERDC-BAS, OFSET, REF and TANF programs, the total in a month may not exceed:
 - (A) The number of hours of care necessary for the client to maintain his or her job including, for clients in the JOBS Plus program, the time the client searches for unsubsidized employment and for which the employer pays the client, or to participate in activities included in a case plan (see OAR 461-190-0161 and OAR 461-190-0310); or
 - (B) 125 percent of the time the client is at work or participating in an approved activity of the JOBS or OFSET program.
 - (b) For the ERDC-SBG program, the total may not exceed the number of hours of care necessary for the client to maintain his or her education, training or employment. The total may not exceed 125 percent of the sum of 200 percent of class hours and the time the client is at work.
 - (c) In the ERDC-BAS, REF and TANF programs, for a client who earns less than state minimum wage, the total may not exceed 125 percent of the anticipated earnings divided by the state minimum wage. The limitation of this subsection is waived for the first three months of the client's employment.
- (5) The following provisions apply to all programs:
- (a) Providers not eligible for the enhanced rate will be paid at an hourly rate for children in care less than 158 hours per month.
 - (b) Providers eligible for the enhanced rate will be paid at an hourly rate for children in care less than 136 hours a month unless the provider customarily bills all families at a part-time monthly rate.

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(c) At their request, providers eligible for the enhanced rate may be paid at the part-time monthly rate if they provide 63 or more hours of care in the month and customarily bill all families at a part-time monthly rate.

(d) The Division will pay at the hourly rate for less than 63 hours of care in the month.

(e) The Division will pay for up to five days each month the child is absent if:

(A) The child was scheduled to be in care and the provider bills for the amount of time the child was scheduled to be in care;

(B) The absent child's place is not filled by another child; and

(C) It is the provider's policy to bill all families for absent days.

(6) The limit in any month for child care payments on behalf of a child whose caretaker has special circumstances, defined in section (7) of this rule, is the lesser of the following:

(a) The amount billed by the provider or providers; and

(b) The monthly rate established in section (8) of this rule multiplied by a factor, limited to 1.5, determined by dividing the number of hours billed by 215.

(7) The limit allowed by section (6) of this rule is authorized once the Division has determined the client has special circumstances. For the purposes of this rule, a client has special circumstances when it is necessary, in order for the client to perform the requirements of his or her employment or training, to obtain child care for a child in excess of 215 hours in a month.

(8) The payment for care of a child who meets the special needs criteria described in section (1)(e) of this rule can be increased to a maximum of 300 percent of the special needs rate provided in the tables in section (9) of this rule. The increase is based on the amount of direct supervision the child requires and is authorized if:

(a) The child requires significantly more direct supervision by the child care provider than normal for a child of the same age; and

(b) The child is enrolled in a local school district Early Intervention or Early Childhood Special Education program or school-age Special Education Program. The enrollment required by this subsection is waived if determined inappropriate by a physician, nurse practitioner, licensed or certified psychologist, clinical social worker, or school district official.

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(9) The following are the child care rates. The rates are based on the type of provider, the location of the provider (shown by zip code), the age of the child, and the type of billing used (i.e., hourly or monthly).

(a) **Group Area A
Hourly Rates (subject to maximum monthly rate)**

	Standard Family Rate	Enhanced Family Rate	Standard Center Rate	Enhanced Center Rate	Enhanced Group Home Rate
Infant	\$2.39	\$2.56	\$3.29	\$3.52	\$2.85
Toddler	\$2.12	\$2.27	\$3.18	\$3.40	\$2.56
Preschool	\$2.12	\$2.27	\$2.34	\$2.50	\$2.38
School	\$2.12	\$2.27	\$2.34	\$2.50	\$2.27
Special Need	\$2.39	\$2.56	\$3.29	\$3.52	\$2.85

**Group Area A
Monthly Rates**

	Standard Family Rate	Enhanced Family Rate		Standard Center Rate	Enhanced Center Rate		Enhanced Group Home Rate	
	Full time	Part time	Full time	Full time	Part time	Full time	Part time	Full time
Infant	\$393	\$315	\$421	\$525	\$421	\$562	\$340	\$454
Toddler	\$361	\$290	\$386	\$509	\$408	\$545	\$307	\$409
Preschool	\$340	\$273	\$364	\$372	\$299	\$398	\$288	\$384
School	\$340	\$273	\$364	\$372	\$299	\$398	\$273	\$364
Special Need	\$393	\$315	\$421	\$525	\$421	\$562	\$340	\$454

Zip codes for Group Area A: Portland, Eugene, Corvallis, Monmouth, and Ashland areas.

97005	97006	97007	97008	97009	97013	97015	97019	97022	97023	97024
97027	97030	97034	97035	97036	97045	97055	97060	97062	97068	97070
97075	97076	97080	97113	97116	97119	97123	97124	97133	97200	97201
97202	97203	97204	97205	97206	97207	97208	97209	97210	97211	97212
97213	97214	97215	97216	97217	97218	97219	97220	97221	97222	97223
97224	97225	97227	97228	97229	97230	97231	97232	97233	97236	97238
97240	97242	97254	97255	97258	97261	97266	97267	97268	97269	97280
97281	97282	97283	97286	97290	97291	97292	97293	97294	97296	97298
97299	97330	97331	97332	97333	97339	97361	97400	97401	97402	97403
97494	97495	97408	97440	97455	97477	97478	97482	97520		

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(b)

**Group Area B
Hourly Rates
(subject to maximum monthly rate)**

	Standard Family Rate	Enhanced Family Rate	Standard Center Rate	Enhanced Center Rate	Enhanced Group Home Rate
Infant	\$1.85	\$1.98	\$2.76	\$2.95	\$2.56
Toddler	\$1.85	\$1.98	\$2.71	\$2.90	\$2.16
Preschool	\$1.65	\$1.77	\$1.97	\$2.11	\$2.16
School	\$1.65	\$1.77	\$1.97	\$2.11	\$2.16
Special Need	\$1.85	\$1.98	\$2.76	\$2.95	\$2.56

**Group Area B
Monthly Rates**

	Standard Family Rate	Enhanced Family Rate		Standard Center Rate	Enhanced Center Rate		Enhanced Group Home Rate	
	Full time	Part time	Full time	Full time	Part time	Full time	Part time	Full time
Infant	\$346	\$278	\$370	\$440	\$353	\$471	\$308	\$411
Toddler	\$318	\$255	\$340	\$435	\$349	\$465	\$256	\$341
Preschool	\$297	\$238	\$318	\$313	\$251	\$335	\$256	\$341
School	\$297	\$238	\$318	\$313	\$251	\$335	\$256	\$341
Special Need	\$346	\$278	\$370	\$440	\$353	\$471	\$308	\$411

Zip codes for Group Area B: Salem, Bend, Medford, Roseburg, Brookings and areas outside the metropolitan areas in Eugene and Portland.

97004	97106	97018	97038	97048	97051	97053	97054
97056	97064	97101	97106	97111	97114	97115	97127
97128	97132	97140	97148	97300	97301	97302	97303
97304	97305	97306	97307	97308	97309	97310	97321
97325	97327	97338	97344	97351	97370	97378	97381
97383	97385	97392	97396	97415	97470	97500	97501
97502	97503	97504	97535	97700	97701	97702	97703
97704	97705	97706	97707	97708	97709		

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(c)

**Group Area C
Hourly Rates
(subject to maximum monthly rate)**

	Standard Family Rate	Enhanced Family Rate	Standard Center Rate	Enhanced Center Rate	Enhanced Group Home Rate
Infant	\$1.85	\$1.98	\$2.12	\$2.27	\$2.27
Toddler	\$1.60	\$1.71	\$2.12	\$2.27	\$1.98
Preschool	\$1.60	\$1.71	\$1.80	\$1.93	\$2.04
School	\$1.60	\$1.71	\$1.80	\$1.93	\$1.77
Special Need	\$1.85	\$1.98	\$2.12	\$2.27	\$2.27

**Group Area C
Monthly Rates**

	Standard Family Rate	Enhanced Family Rate		Standard Center Rate	Enhanced Center Rate		Enhanced Group Home Rate	
	Full time	Part time	Full time	Full time	Part time	Full time	Part time	Full time
Infant	\$345	\$277	\$369	\$392	\$315	\$419	\$277	\$369
Toddler	\$318	\$255	\$340	\$392	\$315	\$419	\$255	\$340
Preschool	\$254	\$204	\$272	\$291	\$234	\$311	\$246	\$327
School	\$254	\$204	\$272	\$291	\$234	\$311	\$209	\$278
Special Need	\$345	\$277	\$369	\$392	\$315	\$419	\$277	\$369

Zip codes for Group Area C: Balance of State, Other State zip codes.

97001	97002	97003	97010	97011	97012	97014	97017	97020	97021	97025	97026
97028	97029	97031	97032	97033	97037	97039	97040	97041	97042	97044	97049
97050	97057	97058	97063	97065	97067	97071	97072	97073	97102	97103	97107
97108	97109	97110	97112	97117	97118	97120	97121	97122	97125	97126	97130
97131	97134	97135	97136	97137	97138	97141	97142	97143	97144	97145	97146
97147	97149	97329	97324	97326	97328	97141	97142	97143	97144	97145	97146
97147	97149	97320	97324	97326	97328	97329	97335	97336	97341	97342	97343
97345	97346	97347	97348	97349	97350	97352	97353	97354	97355	97357	97358
97359	97360	97362	97377	97379	97380	97384	97386	97388	97389	97390	97391

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97393	97394	97395	97406	97407	97409	97410	97411	97412	97413	97414	97416
97417	97419	97420	97423	97424	97425	97426	97427	97428	97429	97430	97431
97432	97433	97434	97435	97436	97437	97438	97439	97444	97442	97443	97444
97445	97446	97446	97448	97449	97450	97451	97452	97453	97454	97456	97457
97458	97459	97460	97461	97462	97463	97464	97465	97466	97467	97468	97469
97463	97473	97476	97479	97480	97481	97483	97484	97486	97487	97488	97489
97490	97491	49492	97493	97494	97495	97496	97497	97498	97499	97522	97523
97524	97525	97526	97527	97528	97530	97531	97532	97533	97534	97536	97537
97538	59739	97540	97541	97543	97544	97601	97602	97603	97604	97620	97621
97622	97623	97624	97625	97626	97627	97630	97632	97633	97634	97635	97636
97637	97638	97639	97640	97641	97710	97711	97712	97720	97721	97722	97730
97741	97732	97733	97734	97735	97736	97737	97738	97739	97740	97731	97742
97750	97751	97552	97753	97754	97756	97758	97759	97750	97761	97800	97801
97810	97811	97812	97813	97814	97817	97818	97819	97820	97821	97822	97823
97824	97825	97826	97827	97828	97829	97830	97831	97832	97833	97834	97835
97836	97837	97838	97839	97840	97841	97842	97843	97844	97845	97846	97847
97848	97850	97851	97856	97856	97858	97859	97861	97862	97864	97865	97866
97867	97868	97869	97870	97871	97872	97873	97874	97875	97876	97877	97878
97880	97881	97882	97883	97884	97885	97886	97901	97902	97903	97904	97905
97906	97907	97908	07090	97910	97911	97913	97914	97916	97918	97919	97920

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ATTACHMENT E

EARLY LEARNING GUIDELINES

“BUILDING A SOLID FOUNDATION FOR LEARNING FOR ALL CHILDREN”

STATEMENT OF NEED

The Office of Student Services and the Office of Special Education propose to develop Common Curriculum Goals and Content Standards for Oregon Early Childhood Education programs. The proposed goals and standards will link early childhood education to Oregon’s Common Curriculum Goals and Content Standards, defining prekindergarten foundations for children to reach the 3rd grade benchmarks.

The Early Childhood Goals and Standards will align with the existing School Age Goals and Standards and the National Head Start Child Outcomes Framework. The prekindergarten Goals and Standards are intended to guide teachers and administrators in on-going development, evaluation and improvement of early childhood programs.

Early Childhood Common Curriculum Goals and Content Standards will address the following State Board of Education goals:

Each student will be ready to learn when entering the public school system;

- Responsibility of establishing high standards for all Oregon students at all grade levels in the state; and
- Responsibility to provide technical assistance to programs to support the development, implementation of and use of rigorous educational programs, curriculum and instructional materials, that provide opportunity for student excellence and encourage desired student outcomes.

PRINCIPLES

Early childhood is a key period of development in a child’s life. Research on early brain development underscores the need to focus on the early years to improve children’s cognitive development, language development and school readiness. With this in mind, the Early Childhood Common Curriculum Goals and Content Standards will be based upon the following principles:

- Young children exhibit an individual range of skills and competencies in any domain of development.

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- Families are primary caregivers and teachers of their children and are the most significant people in nurturing their child's early development.
- Knowledge of family culture and language and its impact on learning informs instruction.
- Standards reflect research and knowledge of child development.
- Curriculum offers a broad range of content, builds on what children know and makes relevant connections between subjects.
- Assessment is on-going, benefits children directly and relies on direct observation of a child's development and work.

DEVELOPMENT

Three documents were utilized to develop the draft of the Prekindergarten ODE Common Curriculum Goals and Content Standards:

- Oregon Common Curriculum Goals and Content Standards, 3rd - 12th grades
- National Head Start Child Outcomes Framework
- National Education Goals Panel Readiness Domains

The Prekindergarten Content Standards will be fully developed in four phases:

Phase I

The initial draft document was completed by a cross department Work Group of early childhood and early childhood special education staff. The draft document aligns the early childhood domains and indicators with the ODE 3rd through 12th grade Common Curriculum Goals and Content Standards. Samples are attached.

Phase II

The draft document will be completed by an expanded cross office Work Group.

Phase III

Draft documents will be reviewed and critiqued by experts, educators and parents from the early childhood community in Oregon, including K-Primary, Early Intervention/Early Childhood Special Education, higher education, community child care and education programs, Oregon Head Start Prekindergarten programs, professional associations, regional educational service centers and other state agencies.

Phase IV

Board approval and implementation.

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Information for the development of the Prekindergarten Common Curriculum Goals and Content Standards document will be drawn from nationally recognized early childhood resources including but not limited to:

- National Head Start Child Outcomes Framework
- National Early Childhood Technical Assistance System (NECTAS)
- Education Commission of the States
- National Early Intervention Longitudinal Study
- The National Information Center for Children and Youth with Disabilities
- Eric Digest
- National Association for the Education of Young Children
- Other States Department of Education work on standards (i.e. the Connecticut Framework Preschool Curricular Goals and Benchmarks)
- Kidsource

RELATED ODE WORK**Early Intervention / Early Childhood Special Education**

Oregon EI/ECSE programs use one of four prescribed curriculum based assessments to assess each child's level of functioning in their area of developmental delay. The data are used, along with other information, to evaluate the effectiveness of the educational strategies used with the child. The areas of development are identified as:

- Cognitive development
- Physical Development (motor, vision and hearing)
- Communication development
- Social/Emotional development
- Adaptive development

Oregon Head Start Prekindergarten Program

The 1998 Head Start reauthorization act requires programs to assess children's growth and development. The Head Start Child Outcomes Framework was developed to implement the legislative requirements. As a result, approximately 8800 Oregon Prekindergarten Head Start children are being assessed in the following eight domains:

- Language development
- Literacy
- Mathematics
- Science
- Creative arts
- Social and emotional development

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- Approaches toward learning
- Physical health

Oregon Kindergarten Readiness Survey

Developed by the Department of Education and the Oregon Progress Board, the Oregon Kindergarten Readiness Survey measures progress toward the Oregon Benchmark for all children to enter school ready to learn. Survey questions were selected from the characteristics rated by kindergarten teachers in a 1995 National Household Survey as essential to school readiness. Six developmental dimensions were addressed as an attempt to gauge young children's readiness for school. These dimensions are derived from the National Education Goals Panel as components of readiness for school:

- Physical well being
- Language use
- Approach to learning
- Cognition and general knowledge
- Motor development
- Social/ emotional development

Others

Additional ODE that could be impacted by the development of Prekindergarten Common Curriculum Goals and Content Standards include:

- Title I preschools
- Even Start
- Nutrition
- Teen Parent Program
- Child Development Centers
- OPTE early Childhood Certification process
- Oregon Reads
- Migrant ESD preschools
- Private Schools Registration

SUMMARY

The proposed Prekindergarten Content Standards will align early childhood education with the Common Curriculum Goals and Content Standards providing guidance for teachers on essential Prekindergarten skills and knowledge and emphasize to the connection between early learning and the cumulative process for obtaining the CIM and CAM. This work is essential for helping children develop foundational knowledge toward achieving the 3rd grade benchmarks and beyond.

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**Oregon Administrative Rule 461-135-0400 Effective 04/01/01
 Department of Human Services
 Specific Requirements; ERDC**

The Division makes payments for child care, including care covered by the ERDC program, subject to the provisions of division 165 of this chapter of rules. To be eligible for ERDC, a filing group must meet the requirements of this rule.

1. For a filing group to be eligible for the ERDC-BAS program, at least one caretaker (see OAR 461-120-0610) must receive income from employment, including employment through a work study program. For clients who are in the start-up phase of self-employment, working on commission, or participating in job-related training that is a condition of employment, the requirement to have earned income may be waived for three months.

2. For the ERDC-SBG program:

a. At least one caretaker must be a student who is either:

A. An undergraduate who has been formally admitted to a post-secondary institution and registered for or attending school full time, meaning at least nine quarter hours or six semester hours of education for credit; or

B. A trainee in a short-term, post-secondary training program at an institution that is eligible for federal financial aid.

b. A caretaker who meets the requirements of subsection (a) of this section must attend school for at least:

A. Three out of four school quarters per academic year;

B. Two semesters per academic year; or

C. For trainees in short-term training programs, an equivalent time period.

c. Students may use ERDC-SBG benefits for school- or employment-related child care needs during an absence from school or during a term in which they are attending school less than full time as defined in subsection (a)(A) of this section if:

A. They intend to attend school full time the following term; and

B. The absence or part-time status does not exceed:

i. One out of four school quarters; or

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- ii. For students on the semester system, the summer break period.
 - d. Students must maintain good standing according to the standards of the institution they are attending.
 - e. Students must maintain full-time status in an academic program by completing at least 27 quarter or 12 semester hours each academic year, unless prevented from doing so by circumstances beyond their reasonable control.
 - f. Participation in the student child care program is limited to a total of six years, unless extended by the Division because of circumstances beyond the student's control.
3. The family must have an allowable child care need as described in OAR 461-160-0040. If in the filing group there are two parents of children in the filing group, and if one of the parents is unemployed, the unemployed parent is considered available to provide child care, making the group ineligible, except in the following situations:
- a. The unemployed parent is physically or mentally unable to provide adequate child care.
 - b. For ERDC-SBG only, the unemployed parent is physically or mentally unable to provide adequate child care, or a student meeting the criteria in section (2) of this rule.
 - c. The unemployed parent is unavailable to provide care while participating in requirements of a case plan other than requirements associated with post- secondary education.
4. The caretaker must use a child care provider who meets the requirements in OAR's 461-165-0160 and 461-165-0180.
5. After June 30, 1999, a client is not eligible for a child care payment in the ERDC program for more than six calendar months if the client is unwilling to obtain for the child a Certificate of Immunization Status.

Stat. Auth.: ORS 411.060

Stats. Implemented: ORS 411.060

STATE PLAN FOR**CHILD CARE & DEVELOPMENT FUND SERVICES****(FOR THE PERIOD 10/1/03 – 9/30/05)****Oregon Administrative Rule 436-135-0401
Effective 1-1-03****Terminate ERDC-SBG**

- (1) Effective October 1, 2002, the ERDC–Student Block Grant (ERDC–SBG) program is not funded. Notwithstanding other rules of the Department, the program is closed effective that date.
- (2) Effective September 30, 2002, all persons eligible for or receiving benefits of the program become ineligible for the program. The Department will not authorize or provide any benefit for any period after September 30, 2002.
- (3) The waiting list of prospective applicants referred to in OAR 461-115-0015(1) will not be maintained.

Stat. Auth.: 411.060

Stats. Implemented: 411.060

**Oregon Administrative Rule 461-165-0180
Department of Human Services****Eligibility of Child Care Providers**

To be eligible for child care payment from the Department, a provider must meet all of the requirements in sections (1), (2), (3), and (4) of this rule.

- (1) The provider must submit a completed Department listing form to the Department. If information available to the Department provides no basis for denial, the Department will approve the provider to receive payment for child care from the Department unless:
 - (a) The provider was previously found ineligible for payment and was not subsequently determined to be eligible; or
 - (b) The Department determines, following completion of Criminal History (CH) and Child Protective Service (CPS) records checks, that the provider, or other subject person, is not eligible for payment.
- (2) The provider must:
 - (a) Allow the Department to inspect the site of care while child care is provided.
 - (b) Keep daily attendance records that show the arrival and departure times each day for each child in care and billing records for each child receiving child care benefits from the Department. The provider must keep the records for 12 months and provide them to Department staff on request.

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- (c) Be the person who actually provides the child care. The provider must notify the Department before using someone else to supervise children on a temporary basis.
- (d) Not be in the same filing group as the child cared for and must not be the child's parent.
- (e) Provide evidence of compliance with the Department's administrative rules, upon request of Department staff.
- (f) Not bill a Department client for an amount collected by the Department to recover an overpayment or an amount paid by the Department to a creditor of the provider because of a lien, garnishment, or other legal process.

(3) Each provider must meet the requirements of either subsection (a) or (b) of this section:

(a) A provider subject to OAR 414-205-0000 to 414-205-0170, 414-300-0000 to 414-300-0440, or 414-350-0000 to 414-350-0250 must be currently certified or registered with the Child Care Division (CCD) of the Employment Department and be in compliance with the applicable rules. The Department may deny eligibility for payment to a registered or certified provider when a review of CH or CPS records, an investigation of a complaint, or information provided by another agency indicates a substantial risk to the health or safety of children in the provider's care.

(b) A provider exempt from the rules specified in subsection (a) of this section must:

(A) Submit names of the following persons together with their authorizations for a record check through the CH record system maintained by the Oregon State Police and the CPS record system maintained by the Department:

(i) The provider and each person the provider uses to supervise children in his or her absence.

(ii) In the case of a provider who provides care for children in the provider's home:

(I) Each person 16 years of age or older who lives in the provider's home; and

(II) Each person who frequently visits the home of the provider during the hours care is provided and may have unsupervised access to a child there.

(iii) The site director of a child care facility exempt from the requirement to be certified by CCD, and each employee of the facility who may have unsupervised access to children in the facility.

(B) Comply with the requirements of OAR 461-165-0400.

(C) Meet the following requirements:

(i) Be 16 years of age or older and in such physical and mental health as will not adversely affect his or her ability to care for a child in care. When a provider under the age of 18 applies to be listed, a responsible adult must also sign the application and must jointly assume all the responsibilities of the minor provider, including the obligation to repay an overpayment. An adult whose child is cared for by the minor provider may not serve as the responsible adult if the Department makes a payment for that care.

(ii) Report to the Department, with respect to any person covered by paragraph (3)(b)(A) of this rule, any arrest and any involvement with CPS or any other agency that provides child protective services.

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- (iii) Report to the Department any change to his or her name or address and the addition of any person to the household within 10 days of occurrence.
- (iv) Report suspected child abuse of any child in his or her care to CPS or a law enforcement agency.
- (v) Supervise each child in care at all times.
- (vi) Prevent persons who have demonstrated behavior that may have a detrimental effect on a child from having access to the children in his or her care.
- (vii) Allow custodial parents of children in his or her care to have immediate access to their children at all times.
- (viii) Inform parents of the need to obtain immunizations for their children.
- (ix) Take reasonable steps to protect children in his or her care from the spread of infectious diseases.
- (x) Provide information, in a manner specified by the Department, required to conduct CH and CPS records checks or determine whether the provider meets health and safety requirements.

(D) Ensure that the facility where care is provided meets the following standards, unless the care is provided in the home of the child. A provider who provides care where the child lives must meet only the requirements of subparagraph (iii) of this paragraph.

- (i) The facility has safe drinking water.
- (ii) The facility has a working smoke detector on each floor level and in any area where children nap.
- (iii) All floor levels used by children have two usable exits to the outdoors (a sliding door or window that can be used to evacuate children is considered a usable exit), or, if a second floor is used for child care, the provider has a written plan for evacuating children in an emergency.
- (iv) Fireplaces, space heaters, electrical outlets, wood stoves, stairways and other hazards have barriers to protect children.
- (v) Firearms, ammunition, and other dangerous items such as medicine, drugs, cleaning supplies, paints, plastic bags, and poisonous and toxic materials are kept in a secure place out of children's reach.
- (vi) The building, grounds, toys, equipment and furniture are maintained in a clean, sanitary and hazard-free condition.
- (vii) The facility has a telephone in operating condition.

(4) A provider is not eligible to receive a child care payment if the Department has referred an overpayment against the provider to a collection agency and the claim is unsatisfied.

Stat. Auth.: ORS 181.537 & ORS 411.060

Stats. Implemented: ORS 181.537, ORS 411.060 & ORS 411.122