

Child Care and Development Fund (CCDF) Plan For Oklahoma FFY 2022-2024

1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. Respondents are asked to identify how match and maintenance-of-effort (MOE) funds are used. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems and describe their efforts on their disaster preparedness and response plans to support continuity of operations in response to emergencies.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1) and 98.16 (a)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a) and 98.16(a)).

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Oklahoma Human Services, Child Care Services

Street Address: PO Box 25352

City: Oklahoma City

State: Oklahoma

ZIP Code: 73125

Web Address for Lead Agency: <https://oklahoma.gov/okdhs/services/child-care-services.html>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name:

Lead Agency Official Last Name:

Title:

Phone Number:

Email Address:

1.1.2 Who is the CCDF Administrator?

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Brittany

CCDF Administrator Last Name: Lee

Title of the CCDF Administrator: Director of Child Care Services

Phone Number: 405-613-4702

Email Address: brittany.lee@okdhs.org

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

CCDF Co-Administrator First Name:

CCDF Co-Administrator Last Name:

Title of the CCDF Co-Administrator:

Description of the Role of the Co-Administrator:

Phone Number:

Email Address:

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as the Lead Agency retains overall responsibility for the administration of the program (658D(b) and 98.16 (d)(1)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as

counties or workforce boards (98.16(i)(3)). Check one.

- a. All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- b. Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policies. Check all that apply.

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

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the eligibility policies the local entity(ies) can set.

C. Other.

Describe:

ii. Sliding-fee scale is set by the:

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the sliding fee scale policies the local entity(ies) can set.

C. Other.

Describe:

iii. Payment rates and payment policies are set by the:

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the payment rates and payment policies the local entity(ies) can set.

C. Other.

Describe:

iv. Licensing standards and processes are set by the:

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of licensing standards and processes the local entity(ies) can set.

C. Other.

Describe:

v. Standards and monitoring processes for license-exempt providers are set by the:

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of standards and monitoring processes for license-exempt providers the local entity(ies) can set.

C. Other.

Describe:

vi. Quality improvement activities, including QRIS are set by the:

A. State or territory

Identify the entity:

B. Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the eligibility policies the local entity(ies) can set.

C. Other.

Describe:

vii. Other. List and describe any other program rules and policies that are set at a level other than the state or territory level:

1.2.2 The Lead Agency has broad authority to operate (i.e., implement activities) through other agencies, as long as it retains overall responsibility. Complete the table below to identify which entity(ies) implements or performs CCDF services.

a. Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

Who conducts eligibility determinations?

CCDF Lead Agency

TANF agency

Local government agencies

CCR&R

Community-based organizations

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

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who issues payments?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who monitors licensed providers?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who monitors license-exempt providers?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

Who operates the quality improvement activities?

- CCDF Lead Agency
- TANF agency
- Local government agencies
- CCR&R
- Community-based organizations

b. Other. List and describe any other state or territory agencies or partners that implement or perform CCDF services and identify their responsibilities.

1.2.3 Describe the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.1 and 1.2.2 (98.16(b)). In the description include:

Written agreements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include at a minimum the elements below (98.11(a)(3)).

--Tasks to be performed

--Schedule for completing tasks

--Budget which itemizes categorical expenditures in accordance with CCDF requirements

--Monitoring and auditing procedures

--Indicators or measures to assess performance of those agencies

Any other processes to oversee and monitor other agencies.

Lead Agency monitors compliance with written agreements with continual monitoring of services delivered, regular progress assessments, annual reviews and meetings to discuss shared information, data reports and other activities.

1.2.4 Upon request, and to the extent practicable and appropriate, Lead Agencies must ensure any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available to other public agencies. This includes public agencies in other states, for their use in administering child care or related programs (98.15(a)(11)).

Assure by describing how the Lead Agency makes child care information systems (e.g., subsidy, registry, and QRIS systems) available to public agencies in other states.

Lead Agency responds to all inquiries for data. The Child Care Monitoring Administration and Safety System (CCMASS) and maintains confidentiality according to the Lead Agency requirements. Information is collected from Adult and Family Services, (AFS) data system for all subsidy information and may be shared and maintains confidentiality following the Lead Agency requirements. Access to program monitoring is available as public record for three years through the Child Care Locator. <https://oklahoma.gov/okdhs/services/child-care-services.html> <http://childcarefind.okdhs.org/childcarefind/>

1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).

Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.

Lead Agency maintains strict confidentiality of all applications, information and records concerning any applicant or recipient in accordance with the Oklahoma Social Security Act, the Federal Social Security Act and Section 183 of Title 56 of the Oklahoma State Statutes OAC 340: 65-1-2. <http://www.okdhs.org/library/policy/Pages/oac340065010002000.aspx>. All records and information regarding a client are confidential and shall be released only to individuals or agencies who have proper authorization from the client/legal representative. All information is used by staff in accordance with a provision of the law. Information is safeguarded and there is a custodian of records responsible for ensuing compliance to the rule. Information is secured and stored in areas authorized by the law. Child care providers receiving CCDF funds have a secured portal that includes the following information about authorizations for care: case number, child's name and amount of copay. The provider also receives a notice of action by mail that contains the same information.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

1.3.1 Describe the Lead Agency's consultation efforts in the development of the CCDF Plan. Note: Lead Agencies must describe in a - c. consultation efforts with required partners listed in Rule and Statute. ACF recognizes that there is great value in consulting with other entities and has provided element d. for Lead Agencies to identify consultation efforts with other agencies or organizations.

a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

Government officials have the opportunity to review Oklahoma's State Plan Draft by providing input during the State Plan process by responding to the posted plan draft and by attending the virtual state plan hearing. The State Plan Hearing follows the State of Oklahoma, Open Meeting Requirements for notification, opportunity to submit input and to receive public provider and parent survey results. The State Plan is provided to the Oklahoma Senate Pro Tempore, The Oklahoma Speaker of the House of Representatives and the Governor of the State of Oklahoma.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The Director of Human Services is a participating board member with the Oklahoma Partnership for School Readiness (OPSR). During OPSR meetings, the state plan process and content are shared and members are given opportunities to respond to content of the plan with suggestions, edits, or additions.

c. Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for states to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many states and tribes have consultation policies and procedures in place.

Oklahoma Tribal State Child Care Association (OTCCA) meets quarterly. This group consists of representatives from various tribal governments operating in the state of Oklahoma. Along with representation from Lead Agency, other participating members are representatives from Child Care Subsidy, partner organizations providing Child Care Resource & Referral Services (CCR&R) , professional development, Head Start, other contracted services related to collaborating with Oklahoma Tribes and the Oklahoma Partnership for School Readiness. These meetings allow participants to be updated on tribal activities including any CCDF activities, child care services activities to include licensing, quality initiatives, subsidy programs and the state Quality Improvement Rating System updates. Lead Agency has cooperative licensing agreements with 6 tribal nations: Creek, Cherokee, Choctaw, Chickasaw, Osage and Delaware Nations. This agreement allows for coordination of licensing monitoring reports. There are 39 federally recognized tribes in Oklahoma. Tribal licensing partners attend Lead Agency sponsored trainings where licensing and subsidy policy information is shared. The state plan process and content is shared with members of OTCCA. Opportunities are provided for input throughout state plan development. State Plan Amendments have been shared during quarterly meetings. Tribal participation in the CCDF reauthorization and state plan

public hearing is encouraged. Lead Agency shares results of the Market Rate Survey with tribes so the results may be utilized for tribal CCDF plan formulation. The CCS parent & provider survey were shared with OTCCA and encouraged to participate.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

The Lead Agency consulted with State agencies and organizations in development of the State Plan. This included Oklahoma State Department of Health (OSDH), Oklahoma State Department of Mental Health Oklahoma, State Department of Education (OSDE) and Sooner Start through State Department of Education. The OSDE is the lead agency for Sooner Start and provides all reporting to the USDE (OSEP). OSDE also provides program monitoring and service coordination (Resource Coordinators) for families. OSDH is responsible for providing all services (excluding service coordination) to families (OT, PT, SLP, Child Development, Nurse, etc.). Through the Oklahoma State Department of Health, Child Guidance, Child Care Warmline, SoonerStart, Child Abuse Prevention and Maternal and Child Health, the State Plan draft was shared with other interested parties. Lead Agency often works with program managers to discuss collaboration efforts. Also included from the Oklahoma State Department of Education were divisions related to Early Childhood Care and Education and collaboration efforts with McKinney-Vento school district liaisons. These divisions received the draft State Plan document and were invited to provide input. The Department of Human Services, monthly Child Care Coordinating Committee meetings include representatives of Child Welfare, Child Care Subsidy, Office of Inspector General, Finance, Office of Background Investigations, and Child Care Services. These divisions are involved in providing services to families and provide feedback on the State Plan. The Lead Agency meets monthly with partner organizations, Oklahoma Child Care Resource and Referral (OCCRRA), Oklahoma State Regents for Higher Education (OSRE), the University of Oklahoma Center for Early Childhood Professional Development (CECPD), Oklahoma Career Technology, and Oklahoma Partnership on School Readiness (OPSR) on State Plan activities and initiatives. These organizations receive notification of the state plan, access to draft responses and were invited to provide feedback. Parents and Child Care Providers were involved in the development of the CCDF Plan by responding to the State Plan Surveys. The Child Care Advisory Committee for Child Care Services meets quarterly and is the official review/advisory committee for Child Care Services. Members serving on the Child Care Advisory Committee represent Child Care Centers, Family

Child Care Homes, Residential and Child Placing Agencies, State Fire Marshal's Office, State Department of Education, State Department of Health, State Department of Mental Health, Career Technology, Child Care Centers, Early Childhood Professional Organizations, Youth Shelters, School-age Programs, private citizens, Oklahoma State Bureau of Investigation, Oklahoma Tribal Child Care Association, Office of Juvenile Affairs, Part-day Programs, Residential Treatment facilities, Head Start Association, and the Commission on Children and Youth. This committee provided information on the Parent and Provider surveys and the state plan. Members are encouraged to submit input to the Lead Agency.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 06/14/2021

Reminder: Must be no earlier than January 1, 2021, which is 9 months prior to the October 1, 2021, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g., the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in a). 05/14/2021

Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

Notice of the Lead Agency's public hearing was posted on the public website beginning

on May 14, 2021. The Lead Agency website is 508 compliant and the draft document was available to be translated into any requested language. Information about the draft document and public hearing was shared with partner agencies, important collaborations, child care associations, child care providers and parents, state and local governments, Oklahoma Tribal Child Care Association, and our own Lead Agency personnel among many others. Information was made available through various mediums included Lead Agency website and social media. Individuals or organizations were made aware that contact could be made with the lead agency and a copy of the draft document would be made available to them. <https://oklahoma.gov/okdhs/services/child-care-services.html>

d) **Hearing site or method, including how geographic regions of the state or territory were addressed.** Due to Covid-19 restrictions a virtual hearing was conducted. The state was represented through participants from throughout the state including rural communities that may have previously been excluded due to travel distance.

e) **How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)** The draft document of the document was posted on the public website beginning on May 14, 2021. The Lead Agency website is 508 compliant and the draft document was available to be translated into any requested language. Information about the draft document was shared with partner agencies, important collaborations, child care associations, child care providers and parents, state and local governments, Oklahoma Tribal Child Care Association, and our own Lead Agency personnel among many others. Information was made available through various mediums included Lead Agency website and social media. Individuals or organizations were made aware that contact could be made with the lead agency and a copy of the draft document would be made available to them. <https://oklahoma.gov/okdhs/services/child-care-services.html>

f) **How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan?** The draft document was available on the website and the public was invited to provide written or verbal comments. Verbal comments were recorded at the CCDF 2022 & 2024 State Plan Public Hearing. All comments were compiled, reviewed, and analyzed by The Lead agency and Child Care Services personnel. The draft document was update and placed on the website.

1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)

a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

<https://oklahoma.gov/okdhs/services/child-care-services/government-relations/child-care-development-fund.html>

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

Describe:

Information and updates on the State Plan are shared during quarterly meetings of the Child Care Advisory Committee. Notification of the website link to the state plan draft document and surveys were provided by email to advisory committee members.

Working with child care resource and referral agencies.

Describe:

The State Plan is shared with the executive director of OCCRRA. All CCR&R staff across the state and the advisory board of OCCRRA receive information related to the State Plan, and are encouraged to share links to the state plan, give information on providing input to the development of the state plan, and post the website link on their own websites and Facebook pages.

Providing translation in other languages.

Describe:

The State Plan could be made available in additional languages other than English if requested. Spanish is the predominate second language in Oklahoma with

approximately 7.37% of households represented. Many of these households are multi-lingual with English and Spanish being spoken by family members.

[Sharing through social media \(e.g., Twitter, Facebook, Instagram, email\).](#)

[Describe:](#)

Lead Agency will share notification of the State Plan on Facebook, listserv and the agency website. Social media was used to inform the public of the state plan content, survey availability, and the state plan public hearing.

[Providing notification to stakeholders \(e.g., parent and family groups, provider groups, advocacy groups\).](#) [Describe:](#)

[Describe:](#)

Lead Agency shares information through public meetings, website, publications, public announcements, listserv, and email and through partner agencies and organizations involved in early childhood education as means of notifying stakeholders.

[Working with statewide afterschool networks or similar coordinating entities for out-of-school time.](#)

[Other.](#)

[Describe:](#)

[1.4 Coordination with Partners to Expand Accessibility and Continuity of Care](#)

[1.4 Coordination with Partners to Expand Accessibility and Continuity of Care](#)

[Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care \(98.14\(a\)\(1\)\).](#)

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

a. The Lead Agency is required to coordinate with the following agencies. Provide a description for how coordination occurred.

i. Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals, processes, and results:

Lead Agency's goal is to have seamless communication between licensing and partners, with local government inclusion, related to accessibility and expansion of quality child care. Oklahoma Child Care Resource & Referral, contracted through Oklahoma Human Services, initiates processes for advocacy to quality care for young children with local, state and federal representatives. Lead Agency licensing staff share information with government officials as well. Collaboration within these partnerships include workgroups, committees and other community activities related to access of quality child care. Within the Lead Agency, meetings are held monthly with other Oklahoma Human Services

divisions to inform leaders about child care service initiatives. Lead Agency continues to evaluate results for future improvement.

ii. [State Advisory Council on Early Childhood Education and Care or similar coordinating body \(pursuant to 642B\(b\)\(1\)\(A\)\(i\) of the Head Start Act\). Describe the coordination goals, processes, and results:](#)

Oklahoma Partnership for School Readiness (OPSR) is the governor-appointed coordination council for oversight of state and local early childhood system efforts in the state of Oklahoma. OPSR's goal is to engage state level coordination of organizations and local early childhood initiatives on ways to improve access and quality of child care. OPSR uses input gathered through these coordination efforts, as well as input from families, to ensure children have access to quality care and increased school readiness by elimination of care barriers. OPSR continues to serve in this coordination role for the state. Lead Agency staff serve as active board members for OPSR and are representatives of multiple workgroups within the organization.

[Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.](#)

iii. [Indian tribe\(s\) and/or tribal organization\(s\), at the option of individual tribes. Describe the coordination goals, processes, and results, including which tribe\(s\) was \(were\) consulted:](#)

There are 39 federally recognized tribes in Oklahoma. The Lead Agency continues to maintain its strong relationship with Oklahoma tribes through cooperative work agreements and regular meetings to share information on licensing, quality initiatives, Quality Rating and Improvement Systems (QRIS) and subsidy programs. Lead Agency contracts with tribal programs to expand state subsidized child care to increase accessibility and availability within the state. Tribal families may choose to receive state-subsidized child care even if the tribe has its own subsidy program. In addition, tribal families may receive state and tribal subsidy at the same time as long as services are not duplicated. This coordination expands accessibility to child care programs. In addition, DHS participates in the Early Head Start-Child Care Partnerships with the Choctaw Nation and the Delaware Tribe to expand full day full year services for both tribal and non-tribal infants and toddlers.

N/A-Check here if there are no Indian tribes and/or tribal organizations in the state.

iv. State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool). Describe the coordination goals, processes, and results:

Oklahoma State Department of Health, Oklahoma State Department of Mental Health, and SoonerStart through the Oklahoma State Department of Education participate in strategic planning committees supporting the importance of improving quality of care for young children and offering continuity of services. SoonerStart provides the most comprehensive transition services for children on an IFSP who may be leaving child care and entering Pre-K programs in the public schools. A Program Manager from the Lead Agency has been appointed to serve on the IDEA Part B Advisory Committee. The Lead Agency, Oklahoma Partnership for School Readiness (OPSR) and the Head Start Collaboration Director participate in monthly partner meetings. The goal for these organizations is to offer open communication and increased inclusion opportunities.

v. State/territory office/director for Head Start state collaboration. Describe the coordination goals, processes, and results:

The Lead Agency and the Head Start Collaboration Director work with Head Start/Child Care collaboration grantees to provide children with opportunities for wrap-around services. The Lead Agency partners with Head Start-Child Care Partnership grantees by layering funding so that children receiving subsidized child care can receive full day, full year services. Head Start-CCP grantees and the Lead Agency meet quarterly to report on progress and discuss any subsidy issues that need to be resolved. The State Head Start Collaboration Director is on numerous workgroups with staff from the Lead Agency. Staff from Lead Agency also participate in committees with members representing Head Start organizations.

vi. State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals, processes, and results:

Oklahoma State Department of Health offers the services of immunization field consultants to assist DHS Licensing Specialists in monitoring compliance with state immunization requirements. This coordination assists with improving the quality of care

for children. Collaboration between the Lead Agency and the Department of Health provides Warmline services to child care providers related to care, health and safety, behavior and development, and making referrals to programs requesting Infant and Early Childhood Mental Health Consultation.

vii. State/territory agency responsible for employment services/workforce development.

Describe the coordination goals, processes, and results:

Lead Agency provides services through the Adult and Family Services Division. The Adult and Family Services Director serves on the Governor's Workforce Development Committee and can inform that taskforce of the importance of child care related to workforce development. The Lead Agency places kiosks in one stop centers around the state so that parents utilizing employment and workforce development services can apply for subsidized child care online. This allows for greater accessibility to child care. Lead Agency administers the TANF program. TANF recipients participating in a TANF work activity are eligible to receive subsidized child care. Transfer of TANF dollars to the subsidy program allows increased accessibility to childcare, continuity of care, and potential for full day services.

viii. State/territory agency responsible for public education, including Prekindergarten (PreK). Describe the coordination goals, processes, and results:

Lead Agency works with the Oklahoma State Department of Education (OSDE) Special Education Department and Early Childhood Department to provide resources and information regarding child care, such as the *Parent's Guide to Inclusive Child Care* and the *Provider's Guide to Inclusive Child Care* which are available in English and Spanish, Oklahoma's Core Competencies for Early Childhood Practitioners, *Oklahoma's Core Competencies for Out-of-School Time Programs*, and the revision of *Oklahoma Early Learning Guidelines for Infants, Toddlers, Twos* and *Oklahoma Early Learning Guidelines for 3-5 year olds*. Child Care Services and OSDE collaborate on ways to improve access to quality early childhood care and education. As changes were made to the Oklahoma Academic Standards and Head Start Framework, the Early Learning Guidelines (ELG) were updated to reflect those changes and to coordinate expectations for Pre-K standards. The director of early childhood education serves on the Child Care Advisory Committee and other shared interest workgroups. These efforts support the continuity of care and program content guidelines.

ix. State/territory agency responsible for child care licensing. Describe the coordination goals, processes, and results:

Lead Agency is responsible for licensing and regulation of licensed programs within the state. Lead Agency responds to input from child care providers related to the licensing requirements and ways to increase quality of child care and work environments for caregivers. Round table discussions have been held to gather input from the workforce related to current child care requirements.

x. State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals, processes, and results:

The goal of promoting nutrition programs in child care programs is to allow programs access to quality guidelines for nutrition for all children. Lead Agency coordinates with the Oklahoma State Department of Education to ensure facilities with subsidy contracts have access to CACFP so that balanced and nutritious meals are available to children who attend the facility. The result is that child care licensing and CACFP coordination allow programs to participate in quality nutritional standards. The Lead Agency works closely with University of Oklahoma Health Sciences Center, Happy Healthy Homes by promoting their services and activities within the state by representation on work committees and their personnel participating in CCS committees working to promote nutrient to licensed programs.

xi. McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals, processes, and results:

The goal of working with other agencies serving homeless children and families is to increase access to quality child care for all families. Child Care Services personnel collaborate with the Oklahoma State Department of Education to promote awareness of and services to families and children experiencing homelessness. A publication was developed by the Lead Agency for use by anyone working with children and families experiencing homelessness across the state, including public schools. The publication is designed to inform families of services that might be available including child care subsidy, SNAP, WIC, Sooner Care (Medicaid) and TANF.

<https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/17-17.pdf> The Lead Agency works to expand the availability of child care to homeless

families through contact with CCR&R and other local and state public and non-profit agencies. Eligibility determination staff is out-stationed at several homeless shelters around the state to take applications and distribute informational materials regarding subsidized child care. Lead Agency and Head Start Collaboration Director collaborate to provide ways to meet the needs of families experiencing homelessness by partnering together to offer full-day, full year care.

xii. State/territory agency responsible for the Temporary Assistance for Needy Families (TANF) program. Describe the coordination goals, processes, and results:

The Lead Agency administers the TANF program. Transfer of TANF dollars to the subsidy program allows increased accessibility to child care. TANF recipients participating in a TANF work activity are eligible to receive subsidized child care. The results of accessibility to child care allow for continuity of care, and potential for extension to full day services.

xiii. Agency responsible for Medicaid and the state Childrens Health Insurance Program. Describe the coordination goals, processes, and results:

The Lead Agency coordinates with the Oklahoma Health Care Authority (Medicaid Agency) to ensure Early Periodic Diagnostic Screening and Treatment, EPSDT, referrals are completed for children who are approved for Medicaid through the Lead Agency. These referrals are part of the comprehensive and preventative health care services for children under age 21 enrolled in Medicaid. The result of the eligibility staff communication of the importance of EPSDT is increased access to developmental screenings for children.

xiv. State/territory agency responsible for mental health. Describe the coordination goals, processes, and results:

Lead Agency has representation on the Child Care Mental Health Consultant Advisory Committee, Infant Mental Health Advisory Committee and on the Children's State Advisory Workgroup. Lead Agency collaborates with The State Department of Health (OSDH) and the Oklahoma State Department of Mental Health and Substance Abuse Services (OSDMHSAS) to offer resources and guidance related to emotional support for young children and their caregivers. The Lead Agency works with both agencies to decrease expulsion and suspension of children due to children's behavior challenges. The committees worked together on a Resource Guide to supplement the expulsion

policy. The Lead Agency has a representative on the IDEA B Behavior and Suspension Subcommittee. These efforts support continuity of care.

xv. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals, processes, and results:

The Lead Agency works with child care resource and referral agencies to provide assistance to community organizations and businesses interested in expanding the availability of child care, providing consumer education assisting with choosing quality child care and increasing quality of care through training and technical assistance. The child care resource and referral agencies work directly with child care providers through resources, provider training, and technical assistance.

xvi. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals, processes, and results:

Discussion will be held with the Oklahoma Partnership for Expanded Learning and the director of 21st Century After-School programs. The goals are to collaborate on providing safe options for care of school age children. A workgroup created professional development courses and guidelines to address the learning objectives for school-age children. These efforts increase the availability of quality programs for school-age children. Other groups working with out-of-school time care are invited to provide input for licensing requirements and ways to improve care to meet the needs of children, youth and their families.

xvii. Agency responsible for emergency management and response. Describe the coordination goals, processes, and results:

i. <https://oklahoma.gov/okdhs/services/child-care-services/government-relations/child-care-development-fund.html>

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

b. The following are examples of optional partners a state might coordinate with to

provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.

i. State/territory/local agencies with Early Head Start - Child Care Partnership grants.

Describe

The Lead Agency and the Head Start Collaboration Director work with Early Head Start/Child Care collaboration grantees to provide children with opportunities for wrap-around services. The grantees hold quarterly meetings facilitated by Oklahoma Partnership for School Readiness (OPSR), with the Lead Agency. The Lead Agency partners with Early Head Start-Child Care Partnership (Early Head Start-CCP) grantees by layering funding so that children receiving subsidized child care can receive full day, full year services. Early Head Start-CCP grantees and the Lead Agency meet quarterly to report on progress and discuss any subsidy issues that need to be resolved.

ii. State/territory institutions for higher education, including community colleges

Describe

The Lead Agency contracts with the Oklahoma State Regents for Higher Education to provide a scholarship program to increase accessibility of professional development, certificates and degrees in child development. Providing education supports leads to improving the quality of child care programs. Scholar coordinators work with students at local or distance-learning institutions with tutoring, course assistance, any concerns with administrative access and completion of forms, etc.

iii. Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.

Describe

The lead Agency collaborated with local communities and non-profit agencies throughout the state to create a new program sub-type, Community Hope Centers, to care for out-of-school time children.

iv. State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.

Describe

The Lead Agency supports Home Visitation programs as they provide for smooth

transitions for children between home, child care programs and/or school. Collaboration agencies for these programs include Oklahoma State Department of Education, Oklahoma State Department of Health, Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma Commission on Children and Youth and the Oklahoma Health Care Authority. Home visitation programs provide comprehensive services to children in child care settings.

[v. Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.](#)

[Describe](#)

The Lead Agency coordinates with the Oklahoma Health Care Authority (Medicaid Agency) to ensure EPSDT referrals are completed for children who are approved for Medicaid through the Lead Agency. Eligibility determination staff explains the importance of the EPSDT program to parents to expand accessibility to developmental screenings.

[vi. State/territory agency responsible for child welfare.](#)

[Describe](#)

The Lead Agency is responsible for the child welfare program. Subsidized child care is available for children in protective custody. Child Care policies allow foster parents to receive child care for work, school, training, or for exceptions as determined by foster care program staff. In addition, intact families who are on a safety plan can receive child care for protective or preventive reasons if the parent doesn't otherwise participate in a qualifying activity (work, school, or training). These policies encourage expanded accessibility and continuity of care for vulnerable children.

[vii. Provider groups or associations.](#)

[Describe](#)

Child Care Advisory Committee subcommittees meet regularly to discuss issues related to centers, family child care homes, quality programs, residential care, etc. Child care providers hold positions on standing subcommittees. The Child Care Advisory Committee membership is made up primarily of child care program providers.

[viii. Parent groups or organizations.](#)

[Describe](#)

Child Care Advisory Committee standing subcommittee members include parents and meet regularly to discuss issues related to access to quality care and safety requirements for centers, family child care homes and out-of-school time programs. Surveys were distributed through media and membership websites to include family input.

[ix. Other.](#)

[Describe](#)

Lead Agency staff meet and work cooperatively with the Oklahoma Tribal Child Care Association to share information on licensing, quality initiatives and subsidy reimbursement programs. DHS contracts with tribal child care programs to expand accessibility and supply of state-subsidized child care. DHS also contracts with private programs statewide that have both state and tribal CCDF contracts. Tribal families may choose to receive state-subsidized child care even if the tribe has its own subsidy program. In addition, tribal families may receive state and tribal subsidy at the same time as long as services are not duplicated. This coordination expands accessibility to child care programs. In addition, DHS participates in the Early Head Start-Child Care Partnerships with the Choctaw Nation and the Delaware Tribe to expand full day full year services for both tribal and non-tribal infants and toddlers. Plans for FY 22 include expansion of the program to include adding part-time Infant and Early Childhood Mental Health Consultants positions which will be housed regionally across Oklahoma available to child care programs and home visitation programs within their region.

Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers and

school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start - Child Care Partnerships:

https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf
).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

Combined is utilizing funding from various federal, state, and private funding sources to provide a comprehensive child care program that serves the needs of Oklahomans requiring child care.

b) Which funds you will combine

CCDF, TANF Direct, TANF Transfer, State Funding (MOE, Matching, State appropriations), Pre-K and Title XX. In addition, the Lead Agency layers child care funds with federal Early Head Start funds in the EHS-CCP. Child Care funds are layered with federal, state, and private dollars in the Oklahoma Early Childhood Program (OECF).

c. What is your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? Note: Responses should align with the goals, processes and results describe in 1.4.1.

Combining funds allows DHS to support all core services and activities associated with Child Care Services in Oklahoma including subsidy, licensing, professional development, EBT, eligibility, administration, background investigations, EHS-CCP and OECP collaborations, implementation of the required changes to subsidy eligibility and collaborations with partners and stakeholders. Pooled funding ensures the maximum amount of children are served in the Child Care Subsidy program.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

All funding streams are combined to provide comprehensive child care services throughout the entire state.

e) How are the funds tracked and method of oversight

Funds are budgeted and allocated to the core services associated with Child Care. DHS Finance Unit tracks all subsidy payments via the Electronic Benefits Transfer (EBT) system.

1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?

Note:

Lead Agencies that use Prekindergarten funds to meet matching requirements must check Prekindergarten funds and public and/or private funds.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may

also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

- a. N/A - The territory is not required to meet CCDF matching and MOE requirements
- b. Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.
 - i. If checked, identify the source of funds:
General revenue funds.
- c. Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).
 - i. If checked, are those funds:
 - A. Donated directly to the State?
 - B. Donated to a separate entity(ies) designated to receive private donated funds?
 - ii. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds:
- d. State expenditures for PreK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with Prekindergarten expenditures (not to exceed 30 percent): 30%

i. If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

Through joint committee participation, Child Care Services (CCS) and Oklahoma State Department of Education (OSDE) revised child care center requirements for Out-of-School Time programs to assist in coordinating with Pre-K programs. CCS and OSDE coordinated Family Engagement technical assistance.

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

Child Care Services collaborated with the public schools in developing requirements to assist child care center programs in providing Pre-K classrooms at the facilities. Subsidy policy allows for payment of wrap around care. The definition of school age was changed to accommodate Pre-K availability.

e. State expenditures for Prekindergarten programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

i. Assure by describing how the Lead Agency did not reduce its level of effort in full-day/full-year child care services, pursuant to 98.55(h)(1) and 98.15(a)(6).

There have been no changes to the MOE since the last State Plan.

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

Child Care Services collaborated with the public schools in developing requirements to assist child care center programs in providing Pre-K classrooms at the facilities.

iii. Estimated percentage of the MOE Fund requirement that will be met with Prekindergarten expenditures (not to exceed 20 percent): 20%

iv. If the percentage is more than 10 percent of the MOE requirement, describe how the state will coordinate its Prekindergarten and child care services to expand the availability of child care:

Child Care Services collaborated with the public schools in developing requirements to assist child care center programs in providing Pre-K classrooms at the facilities.

f. The same funds are used to meet at least some of the CCDF MOE and TANF MOE requirements.

i. If known, what percent of funds used to meet CCDF MOE also is used to meet TANF MOE requirements?

1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

1.6.1 Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of the CCDBG Act. Include in the response any public-private partnerships that have emerged from the response to the COVID-19 pandemic (98.16(d)(2)) and if applicable, how those partnerships will be continued post-pandemic.

The Lead Agency collaborated with the George Kaiser Family Foundation in developing the technology for a smart application that allows families of essential workers to apply for subsidized relative child care provided in the child's own home. In collaboration with the Oklahoma State Department of Education, technology grants were awarded to child care programs to support virtual learning while children were not attending in person learning. PPE and sanitation reimbursement grants were provided to programs to assist with extra costs to provide to meet CDC guidelines. Lead Agency referred programs to the state 211 information and referral system for assistance in obtaining locations for Covid-19 tests and immunizations.

1.7 Coordination With Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

- Provide parents in the state with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State.
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide

additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, describe what services are provided and how it is structured. Use subsection 7.5 to address the services provided by the local or regional child care resource and referral agencies and the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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

No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

Yes. The state/territory funds a CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the following:

How are CCR&R services organized? Include how many agencies, if there is a statewide network, and if the system is coordinated:

Lead Agency works with child care resource and referral agencies to provide services to families seeking child care; providers through training, technical assistance, obtaining information and resources, and keeping their information up-to-date in the Work Life System (WLS) data base. Provider records are reviewed and updated at least twice a year, and whenever any information is changes related to ages of children accepted, quality level, or any action that would cause a facility to be placed on "no referral" status due to a substantiated incident of sufficient status to be investigated. CCR&R work with communities both local, state and federal in the advocacy for your children and their families. Accessibility and affordability are advocacy goals. The State office, Oklahoma Child Care Resource and Referral Association, responded and was awarded a contract to provide assistance through all 77 counties in Oklahoma. The state office oversees the subcontractors in the 2 largest metro regions of the state and the 6 rural areas. There are 7 regions in the state that report to OCCRRA for their service delivery for family referrals, provider services, Hispanic services, Infant Toddler statewide network, Community Services, and financial and technology support.

1.8 Disaster Preparedness and Response Plan

In past disasters, and in response to the COVID-19 pandemic, the provision of emergency child care services and rebuilding and restoring of child care infrastructure has emerged as an essential service. Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children - including the need for safe child care before, during, and after a state of emergency declared by the Governor, or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) - through a Statewide Disaster Plan. The effective date for the establishment of this Statewide Disaster Plan was October 1, 2018.

1.8.1 Did you make any updates to the Statewide Disaster Plan since the FY 2019-2021 CCDF Plan was submitted? Please consider any updates that were made as a result of the Lead Agency's experiences in responding to the COVID-19 pandemic. (Note: It is a Lead Agency decision on how often a plan should be updated and which entities, if any, should be collaborated with in the updating process.)

No

Yes

If yes, describe the elements of the plan that were updated: [Click or tap here to enter text.](#)

The Lead Agency Continuity of Operations Plan has been updated to reflect the change in many staff now working from home; and response to safe and healthy practices in a pandemic. Oklahoma Child Care Services Preparedness and Response Guide also has been revised to include updated information and resource links, guidance for child care licensing staff, and assistance for caring for children, families, and child care staff- before, during, and following an emergency through appropriate plans, practices, and policies. The plan also includes reuniting families with their children following a relocation or evacuation of a facility.

1.8.2 To demonstrate continued compliance with the required elements in the Statewide Disaster Plan, certify by checking the required elements included in the current State Disaster Preparedness and Response Plan.

- a. The plan was developed in collaboration with the following required entities:
 - i. State human services agency
 - ii. State emergency management agency
 - iii. State licensing agency
 - iv. State health department or public health department
 - v. Local and state child care resource and referral agencies
 - vi. State Advisory Council on Early Childhood Education and Care or similar coordinating body
- b. The plan includes guidelines for the continuation of child care subsidies.
- c. The plan includes guidelines for the continuation of child care services.
- d. The plan includes procedures for the coordination of post-disaster recovery of child care services.
- e. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
 - i. Procedures for evacuation
 - ii. Procedures for relocation
 - iii. Procedures for shelter-in-place
 - iv. Procedures for communication and reunification with families
 - v. Procedures for continuity of operations
 - vi. Procedures for accommodations of infants and toddlers
 - vii. Procedures for accommodations of children with disabilities
 - viii. Procedures for accommodations of children with chronic medical conditions
- f. The plan contains procedures for staff and volunteer emergency preparedness training.
- g. The plan contains procedures for staff and volunteer practice drills.

1.8.3 If available, provide the direct URL/website link to the website where the statewide child care disaster plan is posted:

<https://oklahoma.gov/okdhs/services/child-care-services/government-relations/child-care->

2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to "promote involvement by parents and family members in the development of their children in child care settings" (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. OCC expects that Lead Agencies are using targeted strategies for each group to ensure tailored consumer education information. In this section, Lead Agencies will address how information is made available to families, the general public and child care providers to assist them in accessing high-quality child care and how information is shared on other financial assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children's development, including their social-emotional development, is shared.

This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals, or policy issuances. See the Introduction on page 4 for more detail.

2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and child care providers with disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.

- a. Application in other languages (application document, brochures, provider notices)
- b. Informational materials in non-English languages
- c. Website in non-English languages
- d. Lead Agency accepts applications at local community-based locations
- e. Bilingual caseworkers or translators available
- f. Bilingual outreach workers
- g. Partnerships with community-based organizations
- h. Collaboration with Head Start, Early Head Start, and Migrant Head Start
- i. Home visiting programs
- j. Other.

Describe:

Home visiting program and family support: The agency responsible for implementing the Maternal, Infant and Early Childhood Home Visiting Grant is the Family Support and Prevention Service (FSPS) within the Oklahoma State Department of Health.

Home visiting programs provide support for transitions for children between home, child care programs and/or school. They serve to support child well-being through the parent child relationship and the parents' role as the child's first teacher. FSPS houses

home visiting programs that include Nurse Family Partnership, Parents as Teachers Program, and Safe Care (delivered in partnership with OKDHS and OUHSC).

2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.

- a. Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- b. Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- c. Caseworkers with specialized training/experience in working with individuals with disabilities
- d. Ensuring accessibility of environments and activities for all children
- e. Partnerships with state and local programs and associations focused on disability-related topics and issues
- f. Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- g. Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- h. Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- i. Other.

Describe:

2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16 (s); 98.32(d)).

2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:

Child care provider complaints may be made to the Lead Agency whenever there is an allegation of non-compliance with a licensing standard, violation against the Licensing Act, or abuse or neglect of a child in care. All complaints may be submitted anonymously and complainants are not required to identify their relationship to the program. Complaints may be made to the lead agency in any format including in person, email, phone, fax and online. When a complaint is made online, the individual is directed to information for contacting the Lead Agency or the licensing supervisor or licensing staff identified by each county within the state. Complaints are investigated with a determination of substantiated or unsubstantiated. Information may be found at:

<https://oklahoma.gov/okdhs/services/cc/licviewfilecomplaint.html>. The public may make a complaint at: <https://surveys.okdhs.org/TakeSurvey.aspx?SurveyID=922H6n2>

2.2.2 For complaints regarding all providers, including CCDF providers and non-CCDF providers, describe the Lead Agency's process and timeline for screening, substantiating, and responding to complaints. Describe whether the process includes monitoring, and highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:

The Child Care Facilities Licensing Act (Act) [10 O.S. § 406] mandates the Oklahoma Department of Human Services (OKDHS) conduct a full investigation of a complaint alleging a violation against the Act or any licensing requirement. Licensing staff obtains as much relevant information as possible from the complainant. Complaints are investigated when they allege: (1) non-compliance with licensing requirements; (2) operation of an unlicensed facility in violation of the Act; or (3) abuse or neglect of a child in care. Risk levels are determined to ensure a timely investigation. Licensing staff conduct a full investigation, including monitoring the program to obtain sufficient information to make a finding. With supervisory approval, licensing staff may investigate a complaint by telephone only when: (1) the alleged non-compliance does not place children at risk of harm; (2) the facility has not had numerous, repeated, or serious non-compliance; and (3) a monitoring visit has been

made in the last three months during which substantial compliance was documented. When a complaint alleging operation of an unlicensed facility is received, staff conduct a full monitoring visit no later than three facility business days to assess the necessity of a license. After the investigation is completed, the licensing staff, in consultation with the licensing supervisor as appropriate, makes a finding as to whether the complaint is substantiated, unsubstantiated, or ruled out. All complaint investigations are to be completed within 45 calendar days. Call 1-844-834-8314 for a licensing complaint.

<http://www.okdhs.org/services/cc/pages/licviewfilecomplaint.aspx>. If a person suspects Child Abuse and Neglect call 1-800-522-3511, this hotline is available 24 hours-a-day, 7 days-a-week <http://www.okdhs.org/contactus/pages/default.aspx>.

2.2.3 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints. Highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:

The records for all complaints are maintained on the Lead Agency Child Care Services licensing database, Child Care Monitoring, Administration and Safety System (CCMAS). There is no differentiation in policy and processes when investigating allegations against CCDF and non-CCDF providers as well as licensed and licensed exempt programs.

2.2.4 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:

Upon completion of the complaint investigation, licensing staff: document the findings, provide notification of complaint allegation findings to the provider by providing a letter/notification, Licensing Complaint Report Summary, and when applicable, Child Welfare Investigative Summary Notification to Child Care Licensing Services complaint findings. The Licensing specialist enters the complaint information on the licensing database system (CCMASS) as well as in the database file cabinet. The database system is an internet based system holding all of the program's monitoring and complaint information.

2.2.5 Provide the citation to the Lead Agency's policy and process related to parental complaints:

Oklahoma Administrative Code (OAC) 340:110-1-9.2

<https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-1/parts-1/complaint-investigations.html>

2.3 Consumer Education Website

States and territories are required to provide information to parents, the general public, and when applicable, child care providers through a state website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III) and 98.33 (a)). The website must include information to assist families in understanding the Lead Agency's policies and procedures, including licensing child care providers. The website information must also include monitoring and inspection reports for each provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To help families access additional information on finding child care, the website must include contact information for local child care and resource referral organizations. It must also include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the direct URL/website link to the consumer education website in 2.3.11.

Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible. (Note: While there is no Federal CCDF definition for easily accessible, Lead Agencies may consider easily accessible websites to be searchable, simple to navigate, written in plain language, and easy to understand.):

The Lead Agency website is easy for consumers to access from mobile devices, tablets and desk tops. It utilizes a format that easily identifies content, areas of interest to families needing information, assistance and resources. The website tabs line the top and left side of every page of the child care services specific area. The tabs on the left side include: Parents and Families section that provides information on finding/assessing child care, benefits and social services for families and specific information on community services, child development, nutrition, developmental milestones and Child Care Locator; Providers and Educators section that provides information on licensing requirements, criminal background investigations and fingerprint process, Early Learning Guidelines, QRIS, and professional development resources and a how to report abuse and neglect; Partners and Public section contains resources available at state agencies, health and safety guidelines, parent information, and services for the homeless and hungry. There are connections to Quick Links at the bottom of the homepage that include: applying for benefits, filing a licensing complaint, reporting child abuse and neglect, Oklahoma Professional Development Registry and the Oklahoma Child Care Resource and Referral Association. The tabs on the left side of the page also includes a section for all of the licensing requirements, law's, rules, standards and competencies, child development, health and safety, government relations section and contact us page. The design makes it easy to locate topics of interest. The content is written so the general public can understand and contact information allows for viewers to call with questions. The website is 508 compliant so that the content is available to the public. Additional consumer friendly information supported by the Lead Agency is found on the Oklahoma Child Care Resource and Referral Association website: <https://www.oklahomachildcare.org/>. Partnering agencies such as Center for Early Childhood Professional Development, Scholars for Excellence in Child Care and Oklahoma Child Care Resource and Referral Association include links to the Child Care Services website. <https://oklahoma.gov/okdhs/services/child-care-services.html>

2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):

The Lead Agency utilizes several strategies to ensure the widest possible access to services for families that speak languages other than English. The lead agency's website <https://oklahoma.gov/okdhs/services/child-care-services.html> is offered in over 80 languages when used in Google Chrome search engine. The OKDHS Live website is an easy way for an individual eligible for child care benefits, food benefits, SoonerCare or other benefits to apply. <https://www.okdhslive.org/> "Selecting Quality Child Care a Parent's Guide" is available in Spanish.

<https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/14-70sv.pdf> Translation services are available in the DHS county offices. The Lead Agency is exploring other strategies to provide the public with information in other languages. The website links to Oklahoma Child Care Resource and Referral Association that is available in other languages <https://www.oklahomachildcare.org>.

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:

The Lead Agency website ensures the widest possible access to services for persons with disabilities by making the website 508 compliant. Information about available programs can easily be found on the agency website. Links are provided to Developmental Disability Services, Health and Medical Services, SNAP, Individuals with Disabilities Education Act (IDEA), OSDE website referencing Pre-K, Sooner Start and Head Start. Publications "Selecting Quality Inclusive Child Care", "Providers Guide to Inclusive Child Care", and "Early Childhood Assessments" address children's access to services. Lead Agency printed materials go through a web content process to ensure readability for the intended audience. "A Parent's Guide to Selecting Quality Child Care" video is captioned for persons with hearing loss. In addition to having flyers, booklets and pamphlets available on the website, they are also distributed at CCR&R offices by mail or email and at DHS county offices.

2.3.4 Provide the specific website links to the descriptions of the Lead Agency's processes related to child care.

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

a. Provide the direct URL/website link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in subsection 5.2

<http://www.okdhs.org/OKDHS%20Publication%20Library/06-47.pdf>, Understanding the Licensing Process: Rights and Responsibilities.

b. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers, as described in subsection 5.4:

<https://oklahoma.gov/okdhs/services/child-care-services.html>

c. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers, as described in 5.5.2.

<https://oklahoma.gov/okdhs/services/child-care-services.html>

d. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in questions 5.5.4:

[| https://oklahoma.gov/okdhs/services/child-care-services.html](https://oklahoma.gov/okdhs/services/child-care-services.html)

2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

a. Provide the website link to the list of child care providers searchable by ZIP code:

Providers are listed on the Child Care Locator and may be found by zip code. The searchable link is: <http://childcarefind.okdhs.org/childcarefind/>

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

- i. License-exempt center-based CCDF providers
- ii. License-exempt family child care (FCC) CCDF providers
- iii. License-exempt non-CCDF providers
- iv. Relative CCDF child care providers
- v. Other.

Describe

License-exempt center and family child care home providers that receive CCDF funds are not included on the Lead Agency consumer education website. Department of Defense and Tribal programs are only available to military families or tribal members and not the general public.

c) Identify what informational elements, if any, are available in the searchable results.
Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

All Licensed Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver

- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

License-Exempt CCDF Center-based Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

License-Exempt CCDF Family Child Care Home Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

License-Exempt Non-CCDF Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information

- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

Relative CCDF Providers

- Contact Information
- Enrollment capacity
- Hours, days and months of operation
- Provider education and training
- Languages spoken by the caregiver
- Quality Information
- Monitoring reports
- Willingness to accept CCDF certificates
- Ages of children served

2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

d. Other information included for:

- i. All Licensed providers.

Describe

<http://childcarefind.okdhs.org/childcarefind/>

- ii. License-exempt CCDF center-based providers.

Describe

- iii. License-exempt CCDF family child care providers.

Describe

iv. License-exempt, non-CCDF providers.

Describe

v. Relative CCDF providers.

Describe

2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.

a. What information does the Lead Agency provide on the website to determine quality ratings or other quality information?

i. Quality rating and improvement system

ii. National accreditation

iii. Enhanced licensing system

iv. Meeting Head Start/Early Head Start Program Performance Standards

v. Meeting Prekindergarten quality requirements

vi. School-age standards, where applicable

vii. Other.

Describe

b) For what types of providers are quality ratings or other indicators of quality available?

i. Licensed CCDF providers.

Describe the quality information:

Star quality level of I, II, III.

ii. Licensed non-CCDF providers.

Describe the quality information:

Star quality level of I, II, III.

iii. License-exempt center-based CCDF providers.

Describe the quality information:

iv. License-exempt FCC CCDF providers.

Describe the quality information:

v. License-exempt non-CCDF providers.

Describe the quality information:

vi. Relative child care providers.

Describe the quality information:

vii. Other.

Describe

2.3.7 Lead Agencies must post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services. These reports must include the results of required annual monitoring visits, and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the state does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit (e.g., by posting a blank checklist used by monitors).

The reports must be in plain language or provide a plain language summary, as defined by the state or territory, and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must

post at least 3 years of reports.

Certify by responding to the questions below:

a. Does the Lead Agency post? (check one):

- i. Full monitoring reports that include areas of compliance and non-compliance.
- ii. Monitoring reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors). Note: This option is only allowable if the state/territory does not produce monitoring reports that include both areas of compliance and non-compliance.

If checked, provide a direct URL/website link to the website where a blank checklist is posted.

<https://oklahoma.gov/okdhs/services/child-care-services/providers-educators/peresources.html>

b. Check to certify that the monitoring and inspection reports and, if necessary, their plain language summaries include:

- Date of inspection
- Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider.

Describe how these health and safety violations are prominently displayed:

Any non-compliance documented is clearly visible on the program page with a description of the requirement, non-compliance as observed at the time of monitoring, plan to correct date, and if this was a numerous, repeated or serious non-compliance. <http://childcarefind.okdhs.org/childcarefind/>

- Corrective action plans taken by the state and/or child care provider.

Describe:

Plan to correct is included for all documented non-compliances.

- A minimum of 3 years of results, where available.

c. How and where are reports posted in a timely manner? Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports and/or summaries are posted within its timeframe. Note: While Lead Agencies may define "timely," we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken.

i. Provide the direct URL/website link to where the reports are posted.

<http://childcarefind.okdhs.org/childcarefind/>

ii. Describe how the Lead Agency defines timely posting of monitoring reports.

Information for inspections go to the Lead Agency website in real time. Licensing staff conduct monitoring visits and are required to sync their tablets daily at the beginning and end of the day. This ensures that information is available on the CCMASS (Child Care Monitoring and Administration Safety System) and public view within two hours of the sync process.

d. Monitoring and inspection reports or the summaries must be in plain language to meet the CCDF regulatory requirements (98.33 (a)(4)).

i. Provide the Lead Agency's definition of plain language.

The Lead Agency does not have a definition for plain language. As the Lead Agency began working with plain language as the standard for documents, policy and website designs, plainlanguage.gov (<https://www.plainlanguage.gov/>) is used as official guidance.

ii. Describe how the monitoring and inspection reports or the summaries are in plain language.

The Lead Agency policy division must review all policy and requirement changes for Child Care Services and required to ensure that all plain language requirements are met. All monitoring reports are developed using the same language as previously approved.

e. Describe the process for correcting inaccuracies in reports (98.33 (a)(4)).

The Lead Agency licensing staff consult with the licensing supervisor to determine if there is an inaccuracy. If needed, the program is notified and a report documenting the inaccuracy is included in the case record and the online summary is corrected. Any

inaccuracies are corrected as soon as they are identified and the provider is notified immediately. The provider may request a grievance if they feel the monitoring report is not accurate. Grievances are responded to within 10 days and are removed from the online locator during the process. License-exempt CCDF providers are monitored by the Department of Defense and Tribal organizations are responsible for correcting any inaccuracy noted during their monitoring.

f. Describe the process for providers to appeal the findings in reports. Description of the process should include the time requirements and timeframes for:

-- filing the appeal

-- conducting the investigation

-- removal of any violations from the website determined on appeal to be unfounded.

The licensing staff in consultation with the supervisor determines if there is an inaccuracy. If needed the program is notified, a report documenting the inaccuracy is included in the case and the online monitoring report is corrected. The inaccuracies are corrected as soon as they are identified and the provider is notified immediately. The provider can request a grievance if they feel that the monitoring report is not correct. Grievances are responded to within 10 days and removed from the locator during the process. License-exempt CCDF providers are monitored by the Department of Defense and Tribal organizations and these entities take responsibility for correcting inaccuracies in their reports.

g. Describe the process for maintaining monitoring and inspection reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

Monitoring reports are sent to the CCS database when licensing staff sync their information to the system daily. Information is available in real time on the child care locator. The system automatically updates on a daily basis removing monitoring reports on a rolling basis which have been available on the system for three years.

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted by Lead Agencies on the consumer education website (98.33(a)(5)). The serious incident aggregate data

should include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g. centers, family child care homes, and in-home care) and licensing status (i.e. licensed or license-exempt) for all eligible CCDF providers in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information should also include the total number of children regulated to be cared for by provider type and licensing status (81 FR, p. 67477), so that families can view the serious injuries, deaths, and substantiated cases of abuse data in context. The aggregate report should not include individual provider-specific information or names.

a. Certify by providing:

i. The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

The Lead Agency is the designated entity which child care providers are required to submit reports of any serious injury or death of a child while in care. Child care programs are required to report to licensing by the next business day a child death occurring while in care and or when a child injury requires emergency medical attention. Family Child Care Home primary caregivers are required to notify licensing within 24-hours of a child death while in care or injury requiring emergency medical attention. License-exempt CCDF providers, Department of Defense, and Tribal Organizations have not been required to submit this information to the Lead Agency Child Care Services.

ii. The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

Substantiated means that after an investigation of a report of child abuse or neglect and based upon credible evidence, there has been determination that child abuse or neglect occurred. Abuse is defined as harm or threatened harm or failure to protect from harm or threatened harm to the health, safety, or welfare of a child.

iii. The definition of "serious injury" used by the Lead Agency for this requirement.
Serious injury is one that requires emergency medical attention.

b. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.

- i. the total number of serious injuries of children in care by provider category/licensing status
- ii. the total number of deaths of children in care by provider category/licensing status
- iii. the total number of substantiated instances of child abuse in child care settings
- iv. the total number of children in care by provider category/licensing status

c. Provide the website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

<https://oklahoma.gov/okdhs/services/child-care-services/child-care-licensing.html>

2.3.9 The consumer education website must include contact information on referrals to local child care resource and referral organizations (98.33 (a)(6)). How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:

Lead Agency website at <https://oklahoma.gov/okdhs.html> has designated sections to locate information. Under Children and Families/Child Care- there is a heading labeled Quick Links is a link to Child Care Resource and Referral's website <https://www.oklahomachildcare.org>. CCR&R's website is available in English and Spanish with headings for Parents, Child Care Providers, Community & Advocacy, and a section titled, About. There are information tabs for Searching for Child Care; Facility Inspection Files & Reporting; Online Provider Profiles; and the Oklahoma Professional Development Registry.

2.3.10 The consumer education website must include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website (98.33 (a)(7)). Describe and include a website link to this information:

From the Lead Agency Child Care Services main page located on the left is a selection “Contact Us”. Families locate through the main page, located under Child Care Licensing a “Licensing Staff” link which provides specific licensing contact information by county.

<https://oklahoma.gov/okdhs/services/child-care-services.html>

<https://oklahoma.gov/okdhs/services/child-care-services/child-care-licensing/licensing-staff.html>

2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.

<https://oklahoma.gov/okdhs/services/child-care-services.html>

2.4 Additional Consumer and Provider Education

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state Prekindergarten, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.

The Lead Agency maintains a public website at <https://oklahoma.gov/okdhs.html> where individuals receive information about child care subsidy and how to apply for benefits including child care. This includes the OKDHSlive (<https://www.okdhslive.org/>) in which an online application is made available. Local Human Services (DHS) offices provide information and outreach to their communities. The Lead Agency has established in private partnership Community Hope Centers throughout the state where parents of children may come in and apply for DHS benefits including childcare. A new Smart Phone application is being developed for use in early 2021 which will allow even greater ease for parents to apply for child care. Specific information on child care and related resources for families is located at <https://oklahoma.gov/okdhs/services/child-care-services.html>

2.4.2 How does the Lead Agency provide the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers? Certify by describing for each program listed below, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences. Include any partners who assist in providing this information.

Temporary Assistance for Needy Families program:

Parents, providers and public may use the Lead Agency website to locate information on how to apply for benefits and other resources to assist families with education and skills for workforce development.

[Head Start and Early Head Start programs:](#)

Parents, providers and public are able to use the Lead Agency website to locate information on early care and education programs to assist families.

[Low Income Home Energy Assistance Program \(LIHEAP\):](#)

Parents, providers and public are able to use the Lead Agency website to locate information on resources available to assist families.

[Supplemental Nutrition Assistance Programs \(SNAP\) Program:](#)

Parents, providers and public are able to use the Lead Agency website to locate information on SNAP program to assist families.

[Women, Infants, and Children Program \(WIC\) program:](#)

Parents, providers and public are able to use the Lead Agency website to locate information on WIC program to assist families.

[Child and Adult Care Food Program\(CACFP\):](#)

Providers are able to find out information on program from link to Oklahoma State Department of Education, the agency that administers the CACFP. CCR&R and licensing provide information about CACFP to licensed homes and centers.

[Medicaid and Children's Health Insurance Program \(CHIP\):](#)

Parents, providers and public may use the Lead Agency website to locate information on how to apply for benefits, information on children's health insurance to assist families, and other resources to assist families. Parents may apply for Sooner Care on the Oklahoma Health Care Authority website .

[Programs carried out under IDEA Part B, Section 619 and Part C:](#)

Parents, providers and public are able to use the Lead Agency website to locate information on children's health insurance to assist families. The Lead Agency website also has links to the State Department of Education, the State Department of Health

and the State Department of Mental Health and Substance Abuse and lists information related to SoonerStart, Sooner Success and Child Guidance. These agencies provide services to children with disabilities.

2.4.3 Describe how the Lead Agency makes information available to parents, providers and the general public on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity and information about successful parent and family engagement. The description should include:

- what information is provided
- how the information is provided
- how the information is tailored to a variety of audiences, including:
 - parents
 - providers
 - the general public
- any partners in providing this information

Description:

Through the Lead Agency's public facing website, a vast amount of information is available to parents, providers and the general public. This includes information on child development, health and safety with resources gathered based on Oklahoma's Core Competencies <https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/08-91.pdf> and <https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/14-32.pdf>. This information is available to everyone through this public website, though there are specific identifiers for targeted audiences such as Parents & Families, Providers and Educators, Partners and Public, and Publications, Forms & Research are among numerous others. Information is available about the Child Care and Development Fund (CCDF) and our Tribal partners. Information and links are available for contracted partners and other state agencies that offer resources and information to parents and

families, providers and the public where they may seek professional development through the Center for Early Childhood and Professional Development, locate additional resources found at the Oklahoma Child Care Resource and Referral, and Warmline. [The link to Oklahoma Early Learning Guidelines for Infants Toddlers and Twos is https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/10-23.pdf](#). The link to Oklahoma Early Learning Guidelines for Ages 3 – 5 is <http://www.okdhs.org/OKDHS%20Publication%20Library/10-54.pdf>.

2.4.4 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include

- what information is provided,
- how the information is provided, and
- how information is tailored to a variety of audiences, and
- include any partners in providing this information.

Description:

Lead Agency encourages each child care facility to develop policies regarding behavior issues, to engage in professional development that teaches strategies to address social-emotional development and behavioral issues; and to utilize child care consultation and assistance with child guidance through the Warmline. Information on social –emotional development and support available is on the Lead Agency website.

<https://oklahoma.gov/okdhs/services/child-care-services.html> Lead Agency website includes sections: Parents and Families; Providers and Educators; and Partners and Public. Each contains resources related to that particular audience.

2.4.5 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.

The Lead Agency has Expulsion Prevention Guide to Resources information available at <https://oklahoma.gov/okdhs/services/cc/expulsionpreventionguideresources.html> to assist parents and families, the public and child care providers with guidance with principles and policies as well as recommendations when unable to meet the needs of a child due to behavior. These resources include many links to other agencies and entities and printed materials and information to contact partner agencies for further assistance. The Lead Agency allows the individual programs to tailor expulsion policy and procedures based on their individual needs. Licensing Requirements for Child Care Programs require programs have policies related to expulsion with these shared with parents upon enrollment and when changes are made to the policies. All caregivers are encouraged to obtain professional development on children and challenging behavior with these opportunities made available to all individuals working in all licensed programs with all ages of children. Training stipends are provided to child care personnel receiving specific targeted professional development in infant and toddler care, preschool care and school-age children.

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings to parents, the general public and, when applicable, child care providers. Information should include: Existing resources and services that the state can use in conducting developmental screenings and providing referrals to services for children who receive child care assistance. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). This information about the resources can include the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid

program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)). Information on developmental screenings, as other consumer education information, should be accessible for individuals with limited English proficiency and individuals with disabilities.

2.5.1 Certify by describing:

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

Information is available on the Lead Agency's Child Care Services, Child Development, Health and Safety <https://oklahoma.gov/okdhs/services/child-care-services/child-development.html> website for parents and families, providers and the public related to screenings. Information is made available on the website for developmental screenings with links to the CDC, the Oklahoma State Department of Education SoonerStart early intervention program and IDEA program and Oklahoma Health Care Authority EPSDT. Applicants for services through the Lead Agency are referred to these services as needed.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). Information is available on the Lead Agency's Child Care Services, Child Development, Health and Safety <https://oklahoma.gov/okdhs/services/child-care-services/child-development.html> website for parents and families, providers and the public related to screenings. Information is made available on the website for developmental screenings with links to the CDC, the Oklahoma State Department of Education SoonerStart early intervention program and IDEA program and Oklahoma Health Care Authority EPSDT. Applicants for services through the Lead Agency are referred to these services as needed.

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

During the required interview, Lead Agency eligibility workers explain the importance of the EPSDT and SoonerStart programs to parents and families to access the developmental screenings. The Lead Agency coordinates with the Oklahoma Health Care Authority to ensure the EPSDT referrals are completed for children approved for Medicaid through the Lead Agency.

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

A pamphlet detailing information about early childhood assessment and screenings in English and Spanish, Guide to Early Childhood Assessments and Screenings (DHS Pub. No. 13-24) <https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/16-24.pdf> , are available on the Lead Agency website and by request. This pamphlet includes specific details and referral information. Additional information is available on Lead Agency website.

e) How child care providers receive this information through training and professional development.

Professional development opportunities are available through the Center for Early Childhood and Professional Development (CECPD) <https://www.cecpd.org/> website and SoonerStart <https://sde.ok.gov/soonerstart> may be contacted through their website for assistance as well. These links are included on the Lead Agency Child Care Services website.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

Information regarding developmental screenings for children is not cited in policy and is part of the procedure and practices used during the application process.

2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select (98.33 d). Please note that if the consumer statement is provided electronically, Lead Agencies should consider ensuring the statement is accessible to parents, including parents with limited access to the internet, and that parents have a way to contact someone to address their questions.

2.6.1 Certify by describing:

a. How and when the Lead Agency provides parents receiving CCDF funds with a consumer statement identifying the requirements for providers and the health and safety record of the provider they have selected.

All licensed CCDF programs are in the Child Care Locator database. Each program has a summary of program monitoring reports for the last 36 months. Eligibility staff directs parents to the online Child Care Locator database.

b. Certify by checking below the specific information provided to families either in hard copy or electronically. Note: The consumer statement must include the eight requirements listed in the table below.

- Health and safety requirements met by the provider
- Licensing or regulatory requirements met by the provider
- Date the provider was last inspected
- Any history of violations of these requirements
- Any voluntary quality standards met by the provider
- How CCDF subsidies are designed to promote equal access
- How to submit a complaint through the hotline
- How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

c. Provide a link to a sample consumer statement or a description if a link is not available.

<http://childcarefind.okdhs.org/childcarefind/> Is the link to the Child Care Locator. A parent or family member may search for child care by zip code, city, county, program type, and age of child or time of care. A list of licensed child care programs will be generated meeting the needs of the parent. By selecting a program, the information about the program and a Summary of Facility Monitoring will be generated that can be printed. Additional information on Licensing Requirements, description of monitoring, choosing a child care program (*Selecting Quality Child Care* booklet), Reaching for the Stars criteria, frequently asked questions for parents and providers are also included on the website.

3. Provide Stable Child Care Financial Assistance to Families

3. Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination period, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of no fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. In addition, the Lead Agency is also required to describe procedures for the enrollment of children experiencing homelessness and, if applicable, children in foster care.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local Prekindergarten, and other collaborative programs to finish the program year or, similarly, parents enrolled in school can have eligibility extended to allow parents to finish their school year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and

how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

3.1 Eligible Children and Families

3.1 Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size and whose family assets do not exceed \$1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a.) (658P(4)); 98.20(a)).

3.1.1 Eligibility criteria: Age of children served

a) The CCDF program serves children

from 0 weeks

(weeks/months/years)

through 12

years (under age 13). Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

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

- No
- Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: A child with disabilities is defined as a child receiving supplemental security income (SSI), SoonerStart Early Intervention Services, or special education services provided in accordance with an IEP by the local school district. This definition includes a child who meets the medical definition of disability as determined by the Social Security Administration but does not meet the financial criteria to receive SSI benefits.

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

- No.
- Yes

and the upper age is 18

(may not equal or exceed age 19)

d) How does the Lead Agency define the following eligibility terms?

i. "residing with":

The natural or adoptive parent(s) of the children living in the home and for whom child care is needed; the caretaker(s) of the minor child(ren) who needs care whether or not that caretaker is legally and financially responsible for the child(ren); all minor children in the home for whom the payee is financially responsible; the step-parent of the minor child(ren) who is living in the home and for whom care is needed.

ii. "in loco parentis":

A person acting in the place of a parent without going through legal proceedings.

3.1.2 Eligibility criteria: Reason for care

a. How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?

i. Define what is accepted as "Working" (including activities and any hour requirements):

Employment, including self-employment, is defined as wages earned for work performed if the adult is included in the household for income purposes. Travel time to and from employment is included in the definition of working. There is no minimum number of hours required for eligibility; however, the parent must make at least minimum wage for the number of hours he or she works. Sleep time also meets the definition of employment when the client works nights and has an alternative care provider during work hours and needs child care to sleep during the day.

ii. Define what is accepted as "Job training" (including activities and any hour requirements):

A training program is defined as a course of study that when completed qualifies a person to meet requirements for a job the client could not have obtained without the certificate of completion, accreditation, or licensure. In order for a training program to meet the definition, the program must qualify for federal financial aid from the United States Department of Education or other federal or state education fund. Child care is limited to time the client participates in classroom attendance including travel time, as well as any activities required to complete a course or maintain a scholarship. For a TANF recipient, any activity that is approved on their TANF Work plan is allowed.

iii. Define what is accepted as "Education" (including activities and any hour requirements):

An education program may include: 1) high school, 2) GED, literacy, or adult basic education classes, 3) English as a second language classes, or 4) a formal education program which is defined as a course of study that leads to the attainment of an associate or bachelor's degree. In order for an education program to meet the definition, the program must qualify for federal financial aid from the United States

Department of Education or other federal or state education funds. Child care is limited to time the client participates in classroom attendance including travel time, as well as any activities required to complete a course or maintain a scholarship. For a TANF recipient, any activity that is approved on their TANF Work plan is allowed.

iv. Define what is accepted as "Attending" (a job training or educational program) (e.g. travel time, hours required for associated activities such as study groups, lab experiences, time for outside class study or completion of homework):

No minimum number of hours for activities included in the definition of job training or educational program. Reasonable travel time is allowed.

3.1.2 Eligibility criteria: Reason for care

b. Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training without additional work requirements?

Yes

No,

If no, describe the additional work requirements.

3.1.2 Eligibility criteria: Reason for care

c. Does the Lead Agency provide child care to children who receive, or need to receive protective services?

No.

Yes. If yes:

i. Provide the Lead Agency's definition of "protective services":

Protective or preventive child care services are used as an early intervention strategy in certain critical situations to help in preventing neglect, abuse, or exploitation. Child care can be approved in these situations to help stabilize the family situation or to enhance family functioning. Children in State Child Welfare custody, including those in foster care, are considered in protective services and may receive child care in certain situations when the foster parent is not working or involved in an education or training program. Families not involved in the Child Welfare system may also receive protective services in certain situations

when the parent is not working or involved in an education or training program.

Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

No

Yes

iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (98.20 (a)(3)(ii)(A))?

No

Yes

iv. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

No

Yes

v. Does the Lead Agency provide respite care to custodial parents of children in protective services?

No

Yes

3.1.3 Eligibility criteria: Family Income Limits

Note: The questions in 3.1.3 relate to initial determination. Redetermination is addressed in 3.1.8 and 3.2.5.

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

Earned income means total money earned by a person through the receipt of wages, salary, commission, or profit from activities in which the person is engaged as self-employed or as an employee. Unearned income is income a person receives for which the person does not put forth any daily, physical labor. For eligibility determination, the Lead Agency uses adjusted monthly income, which is defined as gross earned plus unearned income, minus legally-binding child support paid, rounded to the nearest dollar.

b. Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (i) and (ii) based on maximum eligibility at initial entry into CCDF. Complete columns (iii) and (iv) only if the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. If the income eligibility limits are not statewide, please complete the chart below using the most populous area of the state or territory (defined as the area serving highest number of CCDF children) and respond to c. below the table.

	(i)	(ii)	(iii)	(iv)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (iii) by (i), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	\$3,184	\$2,707		
2	\$4,164	\$3,539		
3	\$5,144	\$4,372		
4	\$6,123	\$5,205		
5	\$7,103	\$6,038		

c. If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])(98.16(i)(3)).

Eligibility is statewide.

d. SMI source and year. Census Bureau FFY 2021

Reminder: Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at:

https://www.acf.hhs.gov/ocs/resource/liheap-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021?utm_medium=rss.

e. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart in 3.1.3 b.

The most populous counties within the state of Oklahoma listed in order are: Oklahoma, Tulsa, Cleveland, Canadian and Comanche counties. The most populous cities within the state listed in order are: Oklahoma City, Tulsa, Norman, and Lawton.

f. What is the effective date for these eligibility limits reported in 3.1.3 b? 10/01/2020

g. Provide the citation or link, if available, for the income eligibility limits. Income eligibility limits are statewide.

3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

For initial applications, the eligibility worker asks the question at the interview and checks a box on the application. For annual renewals, which do not require an interview, the family member checks a box on the renewal form.

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes.

If yes, describe the policy or procedure and provide citation:

Foster families and families who have adopted children from foster care are exempt

from income and asset tests. In addition, non-parental caretakers who are not legally and financially responsible for children in their care are not subject income or asset tests. Citation: Oklahoma Administrative Code (OAC) 340:40-7-5.

3.1.5 Describe any additional eligibility conditions or rules, which are applied by the Lead Agency (98.20(b)) during:

a. eligibility determination.

No additional eligibility rules.

b. eligibility redetermination.

No additional eligibility rules.

3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Lead Agencies are reminded that authorized child care services are not required to be strictly based on the work, training, or education schedule of the parent (98.21 (g)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

- a. Coordinating with Head Start, Prekindergarten, other early learning programs, or school-age programs to create a package of arrangements that accommodates parents' work schedules
- b. Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- c. Establishing minimum eligibility periods greater than 12 months
- d. Using cross-enrollment or referrals to other public benefits
- e. Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services

- f. Working with entities that may provide other child support services.
- g. Providing more intensive case management for families with children with multiple risk factors;
- h. Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- i. Other.

Describe:

The Lead Agency supports the Early Head Start-Child Care Partnerships (EHS-CCP) and Oklahoma Early Childhood Program (OECP) by providing subsidies during EHS and OECP funded hours. Families participating in EHS-CCP and OECP also benefit by receiving waived copayments and full-time care regardless of the parent's need as long as a need factor is met during some of the EHS or OECP hours.

3.1.7 Fluctuation in earnings.

Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.

- Average the family's earnings over a period of time (i.e. 12 months).
- Request earning statements that are most representative of the family's monthly income.
- Deduct temporary or irregular increases in wages from the family's standard income level.
- Other.

Describe:

3.1.8 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Lead Agencies should note that there are no federal requirements for specific documentation or verification procedures. Check the information that the Lead Agency documents and verifies at initial determination and

redetermination and describe, at a minimum, what information is required and how often.
Check all that apply.

Applicant identity.

Required at Initial Determination

Required at Redetermination

Describe:

Any document that reasonably establishes the applicant's identity is accepted. Examples include Driver's License, work or school ID, ID for health benefits or social service program, voter registration card, wage stub or birth certificate. Applicant identity is verified at initial application.

Applicant's relationship to the child.

Required at Initial Determination

Required at Redetermination

Describe:

Client's statement is accepted and the application is documentation. Applicant's relationship to the child is declared at initial application.

Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

Required at Initial Determination

Required at Redetermination

Describe:

Client's statement is accepted and the application is documentation. Child's information is declared at initial application.

Work.

Required at Initial Determination

Required at Redetermination

Describe:

When employed, the parent or caretaker may declare his or her work schedule as long as the declared work hours are supported by pay information provided. Work schedule is declared at initial application and is verified at each eligibility redetermination

Job training or educational program.

Required at Initial Determination

Required at Redetermination

Describe:

Training or school schedule must be provided. Workers are encouraged to contact the training program or school by phone to clear up discrepancies. Training or school schedule is verified at initial application and at eacheligibility redetermination.

Family income.

Required at Initial Determination

Required at Redetermination

Describe:

Pay receipts, collateral statements, data exchange system screens, public record stubs, employer statement. Family income is verified at initial application and eacheligibility redetermination.

Household composition.

Required at Initial Determination

Required at Redetermination

Describe:

Client's statement is accepted and the application is documentation. Residence is declared at initial application and eacheligibility redetermination.

Applicant residence.

Required at Initial Determination

Required at Redetermination

Describe:

Client's statement is accepted and the application is documentation. Residence is declared at initial application and eacheligibility redetermination.

Other.

Required at Initial Determination

Required at Redetermination

Describe:

For Protective/Preventive requests due to incapacitation of a parent or caretaker, a doctor's statement is required at initial application and eacheligibility redetermination.

3.1.9 Which strategies, if any, will the Lead Agency use to ensure the timeliness of eligibility determinations upon receipt of applications? Check all that apply.

Time limit for making eligibility determinations

Describe length of time:

When a request for child care is dropped off in the county office or received via mail, fax, or online at www.okdhslive.org, the worker attempts to contact the applicant by phone for an interview that day if possible. If the worker is unsuccessful in reaching the applicant over the phone, a letter is mailed scheduling an interview. The application is considered complete once an interview has been completed and all verifications have been received. Verifications may be submitted in person at the local county office or via mail, fax, or uploaded at www.okdhslive.org. The worker is required by policy to determine eligibility within two working days of receiving all necessary verification. If the applicant does not provide requested verification, the worker denies the request within 30 calendar days of the date of the request.

Track and monitor the eligibility determination process

Other.

Describe:

None

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

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

Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the state/territory TANF agency in accordance with Section 407(e)(2) of the Social Security Act.

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

Note: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a. Identify the TANF agency that established these criteria or definitions: Oklahoma Human Services

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

i. "Appropriate child care":

Appropriate child care is care provided by a licensed contracted child care facility; an approved in-home child care facility; a dependable relative who is able and willing to assume responsibility for care and supervision of the child(ren) for a part of the day; a free lower cost facility, such as a day care, pre-school, or Head Start program operated by a community action agency; or informal arrangements made by the parent with a neighbor or friend for occasional care.

ii. "Reasonable distance":

A reasonable distance is a distance determined and agreed upon by the parent and the worker and is dependent upon the individual needs of the parent and child(ren).

iii. "Unsuitability of informal child care":

Unsuitability of informal child care is an arrangement that does not afford the child(ren) adequate care and supervision. Supervision of a child means the function of

observing, overseeing and guiding a child. Unsuitability is an arrangement that does not encourage a child's social development or stimulate the child(ren)'s mental capabilities and afford the child(ren) a safe and stable environment that provides for learning opportunities.

iv. "Affordable child care arrangements":

Affordable child care is defined as not exceeding the maximum child care cost as indicated on DHS Appendix C-4, Child Care Eligibility/Copayment Chart.

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

- i. In writing
- ii. Verbally
- iii. Other.

Describe:

d. Provide the citation for the TANF policy or procedure:

OAC 340:40-7-1

3.2 Family Contribution to Payments

3.2 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Questions 3.2.1 through 3.2.4 address co-payments during the initial/entry-eligibility period.

To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. Question 3.2.5 addresses co-payments during the graduated phase-out period.

3.2.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.

a. Complete the chart based on the most populous area of the state or territory (defined as the area serving the highest number of CCDF children, aligned to the response provided in 3.1.3 e).

Family Size	(a) Lowest initial or First Tier Income Level where family is first charged co-pay (greater than \$0)	(b) What is the monthly co-payment for a family of this size based on the income level in (a)?	(c) What percentage of income is this co-payment in (b)?	(d) Highest initial or First Tier Income Level before a family is no longer eligible.	(e) What is the monthly co-payment for a family of this size based on the income level in (d)?	(f) What percentage of income is this co-payment in (d)?
1	\$1013	\$27	2.66%	\$2707	\$171	6.31%
2	\$1373	\$90	6.55%	\$3539	\$223	6.30%
3	\$1733	\$128	7.38%	\$4372	\$276	6.31%
4	\$2093	\$153	7.31%	\$5205	\$328	6.30%
5	\$2453	\$178	7.25%	\$6038	\$381	6.31%

b. If the sliding-fee scale is not statewide (i.e., county-administered states):

i. N/A. Sliding fee scale is statewide

ii. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart above.

iii. Describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

c. What is the effective date of the sliding-fee scale(s)? 10/01/2020

d. Provide the link(s) to the sliding-fee scale:

<https://oklahoma.gov/okdhs/services/child-care-services/parents-families/pfbenefits.html>

3.2.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply under a. or b.

a. The fee is a dollar amount and (check all that apply):

- i. The fee is per child, with the same fee for each child.
- ii. The fee is per child and is discounted for two or more children.
- iii. The fee is per child up to a maximum per family.
- iv. No additional fee is charged after certain number of children.
- v. The fee is per family.
- vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

vii. Other.

Describe:

b. The fee is a percent of income and (check all that apply):

- i. The fee is per child, with the same percentage applied for each child.
- ii. The fee is per child, and a discounted percentage is applied for two or more children.
- iii. The fee is per child up to a maximum per family.
- iv. No additional percentage is charged after certain number of children.
- v. The fee is per family.
- vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

vii. Other.

Describe:

3.2.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

- No.
- Yes, check and describe those additional factors below.
 - a. Number of hours the child is in care.

Describe:

- b. Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

- c. Other.

Describe:

3.2.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, on a case-by-case basis, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments. If yes, identify and describe which families have their family contributions/co-payments waived.
 - a. Families with an income at or below the Federal poverty level for families of the same size.

Describe the policy and provide the policy citation.

- b. Families who are receiving or needing to receive protective services on a case-by-case basis, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

Children in Child Welfare custody are considered under protective services and have a zero copayment. In addition, certain families who are considered under protective services but not involved in the Child Welfare system may have copayments waived. OAC 340:40-7-8.

- c. Families meeting other criteria established by the Lead Agency. Describe the policy.

In the following situations the family contributions/copayments have been waived: Families with very low incomes that don't rise to the level of a copayment on the DHS Appendix C-4 Child Care Eligibility/Copayment chart, TANF families, children who receive SSI, children under 6 years of age adopted through DHS foster care, families with a child attending an Early Head Start-Child Care Partnership (EHS-CCP) or Oklahoma Early Childhood Program (OECPP) program, children living with a caretaker who is not legally or financially responsible for the child. OAC 340:40-7-12; OAC: 340:40-7-1; OAC: 340:40-7-6.

3.2.5 Policies and processes for graduated phase-out of assistance at redetermination.

3.2.5 Policies and processes for graduated phase-out of assistance at redetermination.

Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility

threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the co-payment restrictions, which do not apply to a graduated phase-out. To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.

Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

a. Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore, is not required to provide a graduated phase-out period. (If checked, skip to subsection 3.3)

The Lead Agency sets the second tier of eligibility at 85 percent of SMI.

A. Describe the policies and procedures.

B. Provide the citation for this policy or procedure.

- The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

A. Provide the income level for the second tier of eligibility for a family of three:

B. Describe how the second eligibility threshold:

1. Takes into account the typical household budget of a low-income family:

2. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

3. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

4. Provide the citation for this policy or procedure related to the second eligibility threshold:

3.2.5 b. To help families transition from assistance, does the Lead Agency gradually adjust co-payments for families eligible under the graduated phase-out period?

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copayments for families under a graduated phase-out.

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? *(Note: Additional reporting requirements are also discussed in section 3.4.3 of the plan.)*

No.

Yes.

Describe:

3.3 Increasing Access for Vulnerable Children and Families

3.3 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

3.3.1 Describe how the Lead Agency defines:

a) "Children with special needs":

A child with special needs is defined as a child receiving supplemental security income (SSI), SoonerStart early intervention services, or special education services provided in accordance with an IEP by the local school district. This definition includes a child who meets the medical definition of disability as determined by the Social Security Administration but does not meet the financial criteria to receive SSI benefits.

b) "Families with very low incomes":

The definition of "families with very low incomes" includes families with income amounts that don't rise to the level of a copayment on the DHS Appendix C-4, Child Care Eligibility/Copayment Chart. These families are prioritized with a zero family share copayment. TANF families are also included in the definition and have a zero family share copayment. TANF families are eligible for child care subsidies based on participation in an assigned work activity which may not meet a traditional need factor

required of non-TANF families

3.3.2 Identify how the Lead Agency will prioritize or target child care services for the following children and families:

Note: If waiving co-payments is checked, Lead Agencies will need to provide further information in question 3.2.4. Paying higher rates for accessing higher quality care is addressed in 4.3.3 and using grants or contracts to reserve spots is addressed in 4.1.6.

a) Indicate how the identified populations are prioritized or targeted.

i. Indicate how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

ii. Indicate how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

iii. Indicate how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4

- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

iv. Indicate how services are prioritized, for families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF (98.16(i)(4)).

Check all that apply:

- Prioritize for enrollment in child care services
- Serve without placing on waiting list
- Waive co-payments (on a case-by-case basis). As described in 3.2.4
- Pay higher rate for access to higher quality care
- Using grants or contracts to reserve spots

b. If applicable, identify and describe any other ways the identified populations in the table above are prioritized or targeted.

There are no waiting lists for subsidized child care. All eligible families are served.

3.3.3 List and define any other priority groups established by the Lead Agency.

All eligible families receive services, there is no waiting list.

3.3.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.

All eligible families receive services, is no waiting list.

3.3.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and technical assistance to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3)

conduct specific outreach to homeless families (658E(c)(3); 98.51).

a. Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

Oklahoma allows a grace period of at least 30 days for homeless families to comply with immunization and health and safety requirements. In addition, homeless families may initially qualify for 30 days of protective/preventive care with waived verifications to help stabilize living arrangements. When verifications are provided, a full eligibility determination is made and care is extended for the remainder of the 12 month eligibility period.

b. Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- i. Lead Agency accepts applications at local community-based locations
- ii. Partnerships with community-based organizations
- iii. Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- iv. Other

A workgroup comprised of staff from several agencies including the State Department of Education and the State Head Start Collaboration office was formed to explore possible ways to meet the needs of children experiencing homelessness and to increase access to child care. Oklahoma took the objective from two points: Getting information to homeless families who might qualify for subsidized child care via agencies/organizations who work with these families; and 2) increasing professional development opportunities for child care providers on identifying and working with families experiencing homelessness. As a result of this workgroup the Lead Agency produced a bookmark type publication that schools, shelters, agencies, etc. may give to families who meet McKinney Vento qualifications. The purpose of the publication was to improve awareness of child care services and conduct outreach to families with young children who may be experiencing homelessness. The bookmarks have been distributed across the state and are available by request. Child care provider professional development is available at The Center for Early Childhood Professional Development, a contractor of DHS Child Care Services, at www.cecpd.org. Courses include: *It Takes a Village*:

Providing Education and Services for Homeless Children and Helping Children Heal from Trauma of Being Homeless. Bridges Out of Poverty training was offered to DHS staff and community members at no cost. The Lead Agency will work with the Homeless Alliance and other community partners to conduct outreach to families by distributing application forms, brochures, and other information materials to these locations. In addition, DHS staff is out-stationed at several homeless shelters around the state to take applications and distribute informational materials regarding subsidized child care.

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

3.3.6 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

Note:

Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

Oklahoma waives immunization and health and safety requirements for homeless children for at least 30 days to allow for expedited enrollment in child care.

Provide the citation for this policy and procedure.

Licensing Requirements: OAC 340:110-3-281.4 and Oklahoma State Health Department: Section 411 of Title 10 of the Oklahoma Statutes.

Children who are in foster care.

Oklahoma waives immunization and health and safety requirements for foster children for at least 30 days to allow for expedited enrollment in child care .

Provide the citation for this policy and procedure.

340:110-3-281.4 and Oklahoma State Health Department: Section 411 of Title 10 of the Oklahoma Statutes.

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

The Lead Agency is the state's licensing agency and works with the State Department of Health to ensure families attending licensed child care have a grace period of at least 30 days to comply with immunization requirements. Families are directed to County Health Departments, Oklahoma Health Care Authority, and community clinics for health services. Additional assistance for other services is available at the local Department of Human Services office.

c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?

No.

Yes.

Describe:

Oklahoma waives immunization and health and safety requirements for all children for at least 30 days to allow for expedited enrollment in child care.

3.4 Continuity for Working Families

3.4.1 Minimum 12-month eligibility.

3.4.1 Minimum 12-month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period:

regardless of changes in income. Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold but not the federal threshold of 85 percent of state median income (SMI), regardless of temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)). The Lead Agency may not terminate assistance prior to the end of the minimum 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. Any temporary change cannot have a time limit (e.g. 60 days, 90 days, etc.). A temporary change in eligible activity includes, at a minimum:

any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1); any changes in residency within the state, territory, or tribal service area

- a. Describe the Lead Agency's policies and procedures related to providing a minimum 12-month eligibility period at initial eligibility determination and redetermination and provide a citation for these policies or procedures.

Once a full eligibility determination (or redetermination) has been made the family qualifies for a 12 month eligibility period regardless of temporary or permanent loss of need. The only exception to this rule applies to TANF or SNAP Education and Training recipients who permanently lose their need factor. These households are given a 3 month period of continued assistance to allow the parent to engage in job search or

resume an education or training program.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period

b. Describe and provide the citation for each of the minimum required elements listed below that are included in the Lead Agency's definition of "temporary change".

- i. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- ii. Any interruption in work for a seasonal worker who is not working.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- iii. Any student holiday or break for a parent participating in a training or educational program.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- iv. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- v. Any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- vi. A child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1).

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

- vii. Any changes in residency within the state, territory, or tribal service area.

Describe or define your Lead Agency's policy:

Child care assistance is continued for the 12 month eligibility period regardless of a temporary or permanent loss of need.

Citation:

OAC 340:40-9-2

c. Provide any other elements included in the state's definition of "temporary change", including those implemented during the pandemic, and provide the citation.

There are no additional elements included.

3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.

a. Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search.)

3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation. This time period allows the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of state median income (SMI), assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

No.

Yes.

If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

b. Does the Lead Agency discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

No, the state/territory does not discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

Discontinuation of assistance after a non-temporary loss of need only applies to families participating in the TANF and SNAP Education and Training programs. All other families receive the full 12 month eligibility period.

ii. Describe what specific actions/changes trigger the job-search period after each such loss or cessation:

Non-temporary loss of need for TANF and SNAP Education and Training households triggers the job-search period.

iii. How long is the job-search period (must be at least 3 months)?

Three months.

iv. Provide the citation for this policy or procedure.

OAC 340:40-9-2

c. The Lead Agency may discontinue assistance prior to the next minimum 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the

next minimum 12-month redetermination. Check all that apply.

- i. Not applicable.
- ii. Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

A. Define the number of unexplained absences identified as excessive:

B. Provide the citation for this policy or procedure:

- iii. A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

OAC 340:40-9-2

- iv. Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

OAC 340:40-9-2

3.4.3 Change reporting during the minimum 12-month eligibility period.

3.4.3 Change reporting during the minimum 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.21 (e)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.2.5 b.

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking

into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.4.2 of the Plan, they may require families to report a non-temporary change in work, training or educational activities (otherwise known as a parent's eligible activity).

a. Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?

No

Yes

b. Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of state median income (SMI)) or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.

i. Additional changes that may impact a family's eligibility during the 12-month period.

Describe:

Changes in custody, only child receiving subsidized child care leaves the home.

ii. Changes that impact the Lead Agency's ability to contact the family.

Describe:

iii. Changes that impact the Lead Agency's ability to pay child care providers.

Describe:

Change in child care provider.

c. Any additional reporting requirements that the Lead Agency chooses to require from parents during the minimum 12-month eligibility period, shall not require an additional office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families. How does the Lead Agency allow families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- i. Phone
- ii. Email
- iii. Online forms
- iv. Extended submission hours
- v. Postal Mail
- vi. FAX
- vii. In-person submission
- viii. Other.

Describe:

Parents can upload a change form into the OKDHSLive website www.okdhslive.org

d) Families must have the option to voluntarily report changes on an ongoing basis during the minimum 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

Families may report changes that increase the amount of care authorized, such as an increase in work hours. They may also report changes that decrease the copayment, such as a job loss. Other reported changes which may increase the amount of care authorized or decrease the copayment include changes to household composition such as the addition or removal of a child in subsidized care.

ii. Provide the citation for this policy or procedure.

OAC 340:40-9-2

3.4.4 Prevent the disruption of employment, education, or job training activities

3.4.4 Prevent the disruption of employment, education, or job training activities.

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility. Check all that apply.

- i. Advance notice to parents of pending redetermination
- ii. Advance notice to providers of pending redetermination
- iii. Pre-populated subsidy renewal form
- iv. Online documentation submission
- v. Cross-program redeterminations
- vi. Extended office hours (evenings and/or weekends)
- vii. Consultation available via phone
- viii. Other.

Describe:

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care, or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. In addition to generally building the supply of child care for all families, this effort also supports equal access for CCDF eligible children to the priced child care market.

This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each state/territory identifies and defines its own categories and types of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

4.1 Maximize Parental Choice and Implement Supply Building Mechanisms

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling their child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll their child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the

option to require higher standards of quality. Lead Agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider, or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).

At the initial interview, case workers provide resources to search the Child Care Locator website or to contact CCR&R for assistance in choosing a provider that is licensed and contracted with DHS to provide subsidized care. After parents choose a provider, care is authorized in the system which generates the certificate/notice to the parent. The certificate is computer generated and mailed to the client and provider on the child care approved in the system. The certificate includes the name of the provider, names of the children authorized for care, the beginning date of the authorizations, the amount of care authorized, and the amount of the copayment.

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

- a. Certificate provides information about the choice of providers
- b. Certificate provides information about the quality of providers
- c. Certificate is not linked to a specific provider, so parents can choose any provider
- d. Consumer education materials on choosing child care
- e. Referrals provided to child care resource and referral agencies
- f. Co-located resource and referral staff in eligibility offices
- g. Verbal communication at the time of the application
- h. Community outreach, workshops, or other in-person activities

i. Other.

Describe:

At the initial interview, parents are advised of the Child Care Locator which is an online tool that allows the parent to input desired child care criteria to return a search result of licensed/contracted facilities. The parent is also given information on how to contact Oklahoma Child Care Resource and Referral for a searchable database, information on all programs including program characteristics and elements of quality licensed programs that contract with the Lead Agency to provide care .

4.1.3 A core principle of CCDF is that families receiving CCDF-funded child care should have equal access to child care that is comparable to that of non-CCDF families (658E(c)(4)(A) and 98.45(a)).

a. Describe how parents have access to the full range of providers eligible to receive CCDF:

All eligible families that receive child care subsidy have their choice of contracted facilities, including center based, home based, and in-home. Oklahoma does not have a waiting list. Child Care Locator information is given to families when they are given notice of approval to receive subsidy reimbursement.

b. Describe state data on the extent to which eligible child care providers participate in the CCDF system:

Currently, 59% of licensed child care providers in the State of Oklahoma accept children who receive subsidies.

c. Identify any barriers to provider participation, including barriers related to payment rates and practices - including for family child care and in-home providers - based on provider feedback and reports to the Lead Agency:

Provider survey results indicate the main barriers include low payment rates, too much paperwork, issues with the EBT technology and continually having to remind parents to swipe attendance.

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

Licensing Requirements for Child Care Programs: "The parents of enrolled children are permitted reasonable access to all parts of the child care center during hours of operation."

Licensing Requirements for Family Child Care Homes: "Parents are provided access to all areas of the home used for child care during the hours that children are in care". Provider's subsidy contract also requires the provider to allow unlimited access to parents.

<https://oklahoma.gov/okdhs/services/child-care-services/laws-rules-standards/licensing-policy-practices.html>

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?

No.

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

a. Restricted based on the minimum number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

Describe:

b. Restricted based on the provider meeting a minimum age requirement.

Describe:

In-home providers must be at least 18 years of age.

c. Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).

Describe:

- d. Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2)).

Describe:

Relative is defined as aunt, uncle, grandparent, great grandparent, or sibling not living in the home.

- e. Restricted to care for children with special needs or a medical condition.

Describe:

- f. Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

Prior to approval, in-home providers must complete various background checks including a child welfare and criminal history check. Persons convicted of or entering a plea of guilty for (1) violence against a person, (2) child abuse or neglect, (3) possession, sale or distribution of illegal drugs, (4) sexual misconduct, or (5) gross irresponsibility or disregard for the safety of others are not approved as in-home providers. The in-home provider must also complete first aid and CPR training prior to approval. Once approved, the in-home provider must complete basic health and safety training and provide a self-certification within 90 days of approval. After the first year, the in-home provider must complete a minimum of 6 hours of training annually. If caring for a special needs child, the in-home provider must complete an additional 6 hours of training related to caring for a child with disabilities within 6 months of approval.

- g. Other.

Describe:

The provider must not be a member of the child's household and can only care for the child of one family at a time.

4.1.6 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.7.

Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

ii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers) and how grants or contracts are promoted by the Lead Agency:

iii. How rates for contracted slots are set through grants and contracts and if they are viewed by providers as a vehicle for stabilizing payments.

4.1.6 Child care services available through grants or contracts.

b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care?

No

Yes. If yes, does the Lead Agency use grants or contracts to increase the supply and/or quality of child care programs serving the populations below? Check all that apply.

i. Grants or Contracts are used in Child Care Programs that serve Children with disabilities:

To increase the supply of care

To increase the quality of care

ii. Grants or Contracts are used in Child Care Programs that serve Infants and toddlers:

To increase the supply of care

To increase the quality of care

iii. Grants or Contracts are used in Child Care Programs that serve School-age children:

To increase the supply of care

To increase the quality of care

iv. Grants or Contracts are used in Child Care Programs that serve Children needing non-traditional hour care:

To increase the supply of care

To increase the quality of care

v. Grants or Contracts are used in Child Care Programs that serve Children experiencing homelessness:

To increase the supply of care

To increase the quality of care

vi. Grants or Contracts are used in Child Care Programs that serve Children with diverse linguistic or cultural backgrounds:

To increase the supply of care

To increase the quality of care

vii. Grants or Contracts are used in Child Care Programs that serve Children in underserved areas:

To increase the supply of care

To increase the quality of care

viii. Grants or Contracts are used in Child Care Programs that serve Children in urban areas:

- To increase the supply of care
- To increase the quality of care

ix. Grants or Contracts are used in Child Care Programs that serve Children in rural areas:

- To increase the supply of care
- To increase the quality of care

x. Grants or Contracts are used in Child Care Programs that serve Other populations, please specify :

- To increase the supply of care
- To increase the quality of care

Describe

4.1.7 Lead Agencies must identify shortages in the supply of high-quality child care providers that meet parents' needs and preferences. List the data sources used to identify any shortages and declines in the supply of care types that meet parents' needs. Also describe the method of tracking progress to support equal access and parental choice (98.16(x)).

a. In child care centers.

When a family member calls the referral line and we do a search, the parent states their needs; the referral specialist conducts search in Work Life Systems (WLS), the child care provider database, to find referrals to give the family. If there are fewer than 3 options available, the specialist contacts the region for further options via email or phone. The typical reason a family would have a need that is difficult to be matched with a provider is due to hours of operation- the family needs early drop off, late pick up, or overnight care- often in a rural region. There is occasionally a need for care for a child that needs medical care- such as administration of insulin. Between the region and the call center, most needs can be met by contacting child care providers and discussing what the specific needs could be and the support that would be available to help meet the needs.

b. In child care homes.

The response is the same for care searches for family child care homes. When a family

member calls the referral line and we do a search, the parent states their needs; the referral specialist conducts search in Work Life Systems (WLS), the child care provider database, to find referrals to give the family. If there are fewer than 3 options available, the specialist contacts the region for further options via email or phone. The typical reason a family would have a need that is difficult to be matched with a provider is due to hours of operation- the family needs early drop off, late pick up, or overnight care- often in a rural region. There is occasionally a need for care for a child that needs medical care- such as administration of insulin. Between the region and the call center, most needs can be met by contacting child care providers and discussing what the specific needs could be and the support that would be available to help meet the needs.

c. Other.

The OK Futures Needs Assessment, a product of the federal Preschool Development Grant awarded to Oklahoma Partnership for School Readiness (OPSR), was utilized to identify unmet needs in Oklahoma's Early Childhood Care and Education (ECCE) system. The needs assessment was developed by the Urban Institute in collaboration with OKFutures partners, parents, providers and focus groups across Oklahoma. The Lead Agency is also currently partnering with the Urban Institute in a study of non-traditional hours care in rural areas of Oklahoma. The Lead Agency will track progress in expanding access and parental choice by examining reports on supply and demand from the Oklahoma Child Care Resource and Referral Association.

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

a) Children in underserved areas. Check and describe all that apply.

- i. Grants and contracts (as discussed in 4.1.6).

Describe:

- ii. Targeted Family Child Care Support such as Family Child Care Networks.

Describe:

- iii. Start-up funding.

Describe:

- iv. Technical assistance support.

Describe:

Coordinated through Oklahoma Child Care Resource and Referral, Regional Partner meetings are held quarterly in conjunction with all service providers within a specific region, other statewide and regional workgroups, and child care licensing personnel. During these meetings, it is discussed how to increase supply of care for specific populations, care types, geographic availability, and underserved areas, These groups collaborate to work through challenges for care needed and coordinate technical assistance supports to these areas. Licensing specialists assigned to these areas also work closely with potential programs to assist them through all aspects of the licensing process. These work to increase both supply and quality of care being provided.

- v. Recruitment of providers.

Describe:

Oklahoma Child Care Resource & Referral regional providers conduct provider recruitment events in their region of the state. Since they have been involved in helping families find care, they know what is needed to meet needs and work creatively to assist in finding that kind of care. Through their Recruitment events, information is shared on what would be required of an individual or organization to begin a new child care program, to expand what is currently offered; or to meet with community organizations to discuss needs related to workforce effectiveness and availability. Licensing specialist assigned to regions offer assistance through regional and local events to inform the public about licensing processes, requirements and child care needs. These work to increase the supply of care.

- vi. Tiered payment rates (as in 4.3.3).

Describe:

Subsidy rates for child care programs vary according to QRIS level. Higher quality programs receive a higher reimbursement rate in all areas of the state.

- vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Leadership Academy is available to personnel in child care programs and home based care. These help to support sound business practices and improve the overall quality of care provided to children.

- viii. Accreditation supports.

Describe:

- ix. Child Care Health Consultation.

Describe:

Oklahoma Child Care Warmline is available to programs throughout the state and work to improve the quality of care provided to children.

- x. Mental Health Consultation.

Describe:

Available through Oklahoma Child Care Warmline & Oklahoma State Department of Mental Health and Substance Abuse work with program staff to improve the quality of care provided.

- xi. Other.

Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-

traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

b. Infants and toddlers. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

ii. Family Child Care Networks.

Describe:

iii. Start-up funding.

Describe:

iv. Technical assistance support.

Describe:

OCCRRA, Infant Toddler training specialist provide outreach and TA throughout the state to programs caring for infants and toddlers. These efforts work to improve the quality of care provided.

v. Recruitment of providers.

Describe:

Oklahoma Child Care Resource & Referral regional providers conduct provider recruitment events in their region of the state. Since they have been involved in helping families find care, they know what is needed to meet needs and work creatively to assist in finding that kind of care. Through their Recruitment events, information is shared on what would be required of an individual or organization to begin a new child care program, to expand what is currently offered; or to meet with community organizations to discuss needs related to workforce effectiveness and availability. Licensing specialist assigned to regions offer assistance through regional and local events to inform the public about licensing processes, requirements and child care needs. These work to increase the supply of care.

vi. Tiered payment rates (as in 4.3.3).

Describe:

To increase the availability of child care during non-traditional hours (evening, overnight, and weekends), there is a non-traditional hours add-on rate that is paid in addition to the typical subsidy rate.

- vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Leadership Academy is available to personnel in child care programs and home based care. These help to support sound business practices and improve the overall quality of care provided to children.

- viii. Accreditation supports.

Describe:

- ix. Child Care Health Consultation.

Describe:

Oklahoma Child Care Warmline is available to programs throughout the state and work to improve the quality of care provided to children.

- x. Mental Health Consultation.

Describe:

Available through Oklahoma Child Care Warmline & Oklahoma State Department of Mental Health and Substance Abuse work with program staff to improve the quality of care provided.

- xi. Other.

Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to

improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

c. Children with disabilities. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

ii. Family Child Care Networks.

Describe:

iii. Start-up funding.

Describe:

iv. Technical assistance support.

Describe:

Coordinated through Oklahoma Child Care Resource and Referral, Regional Partner meetings are held quarterly in conjunction with all service providers within a specific region, other statewide and regional workgroups, and child care licensing personnel. During these meetings, it is discussed how to increase quality of care for specific populations, care types, geographic availability, and underserved areas, These groups collaborate to work through challenges for programs and coordinate technical assistance supports to these areas. Licensing specialists assigned to these areas also work closely with programs to assist them in locating resources throughout the region to assist in care for all children. These work to increase quality of care being provided.

v. Recruitment of providers.

Describe:

Oklahoma Child Care Resource & Referral regional providers conduct provider recruitment events in their region of the state. Since they have been involved in helping families find care, they know what is needed to meet needs and work creatively to assist in finding that kind of care. Through their Recruitment events, information is shared on what would be required of an individual or organization to begin a new child care program, to expand what is currently offered; or to meet with community organizations to discuss needs related to workforce effectiveness and

availability. Licensing specialist assigned to regions offer assistance through regional and local events to inform the public about licensing processes, requirements and child care needs. These work to increase the supply of care including care for children with special needs.

vi. Tiered payment rates (as in 4.3.3).

Describe:

Programs receive increased pay for care provided to children with disabilities.

vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Leadership Academy is available to personnel in child care programs and home based care. These help to support sound business practices and improve the overall quality of care provided to children.

viii. Accreditation supports.

Describe:

ix. Child Care Health Consultation.

Describe:

Oklahoma Child Care Warmline is available to programs throughout the state and work to improve the quality of care provided to children.

x. Mental Health Consultation.

Describe:

Available through Oklahoma Child Care Warmline & Oklahoma State Department of Mental Health and Substance Abuse works with program staff to improve the quality of care provided.

xi. Other.

Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

d. Children who receive care during non-traditional hours. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

ii. Family Child Care Networks.

Describe:

iii. Start-up funding.

Describe:

iv. Technical assistance support.

Describe:

Coordinated through Oklahoma Child Care Resource and Referral, Regional Partner meetings are held quarterly in conjunction with all service providers within a specific region, other statewide and regional workgroups, and child care licensing personnel. During these meetings, it is discussed how to increase quality of care for specific populations, care types, geographic availability, and underserved areas, These groups collaborate to work through challenges for programs and coordinate technical assistance supports to these areas. Licensing specialists assigned to these areas also work closely with programs to assist them in locating resources throughout the region to assist in care for all children. These work to increase quality of care being provided.

v. Recruitment of providers.

Describe:

Oklahoma Child Care Resource & Referral conduct recruitment of provider events

in their region of the state. Since they have been involved in helping families find care, they know what is needed to meet needs and work creatively to assist in finding that kind of care. Through their Recruitment events, information is shared on what would be required of an individual or organization to begin a new child care program, to expand what is currently offered; or to meet with community organizations to discuss needs related to workforce effectiveness and availability. Licensing specialists assigned to regions offer assistance through regional and local events to inform the public about licensing processes, requirements and child care needs. These work to increase the supply of care.

vi. Tiered payment rates (as in 4.3.3).

Describe:

vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Leadership Academy is available to personnel in child care programs and home based care. These help to support sound business practices and improve the overall quality of care provided to children.

viii. Accreditation supports.

Describe:

ix. Child Care Health Consultation.

Describe:

Oklahoma Child Care Warmline is available to programs throughout the state and work to improve the quality of care provided to children.

x. Mental Health Consultation.

Describe:

Available through Oklahoma Child Care Warmline & Oklahoma State Department of Mental Health and Substance Abuse works with program staff to improve the quality of care provided.

xi. Other.

Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

e. Other. Check and describe all that apply.

i. Grants and contracts (as discussed in 4.1.6).

Describe:

ii. Family Child Care Networks.

Describe:

iii. Start-up funding.

Describe:

iv. Technical assistance support.

Describe:

v. Recruitment of providers.

Describe:

vi. Tiered payment rates (as in 4.3.3).

Describe:

vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

viii. Accreditation supports.

Describe:

ix. Child Care Health Consultation.

Describe:

x. Mental Health Consultation.

Describe:

xi. Other.

Describe:

Quality Coaches are available statewide to provide support for quality care for children. Stipends awarded through the CECPD for individuals to advance professional development goals. Free training is available to all providers throughout the state. Scholars for Excellence in Child Care Scholars provide educational supports for individuals to achieve overall quality in the programs they work in. The state QRIS strives for programs to create an overall quality care for children through advancement in star rating.

4.1.9 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs (658 E(c)(2)(M); 98.16 (x);98.46(b)).

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The Lead Agency utilizes several national level data sources to identify areas with high concentrations of poverty and unemployment. Oklahoma Child Care Resource and Referral Agency also conducts regional supply and demand studies.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant

concentrations of poverty and unemployment and that do not have high-quality programs

The Lead Agency focuses on serving all families in need of services. Families can apply for child care assistance in person at local DHS county offices or community partners or can apply online. Eligibility staff refer families to the Child Care Locator (which lists programs according to quality with the highest quality listed first) or to the regional Child Care Resource and Referral agencies whose services are available to families in every county of the state. Children who receive subsidy are required to attend programs that participate in the state's Quality Rating and Improvement System (Stars). Ninety-six percent of children in the state who receive subsidies attend 2 and 3 Star programs. The Lead Agency does not have a waiting list. The Lead Agency layers funding with the Oklahoma Early Childhood Program and the Early Head Start-Child Care Partnerships who focus their efforts in areas with high concentrations of poverty.

4.2 Assess Market Rates and Analyze the Cost of Child Care

4.2 Assess Market Rates and Analyze the Cost of Child Care

Key principles of the CCDF are to: (1) provide equal access to childcare for children receiving childcare assistance; and (2) ensure parental choice by offering a full range of childcare services. Payment rates that are too low to support equal access undermine these principles. To establish subsidy payment rates that ensure equal access, Lead Agencies collect and analyze data through a number of tools. Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of childcare services by geographic area, type of provider, and age of child or (2) an ACF pre-approved alternative methodology, such as a cost estimation model (CEM) (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to judge what expected costs would be incurred by childcare providers and parents under different scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver childcare services (CCDF-ACF-PI-2018-01).

Regardless of whether Lead Agencies conduct a MRS or an alternative methodology, they are required to analyze the cost of providing child services, known as the narrow cost analysis, that meet basic health/safety/quality and staffing requirements (base level care) (98.45(b)(3), (f)(1)(ii)(A), and (f)(2)(ii)), and higher-quality care at each level of quality, as defined by the Lead

Agency (98.45(b)(4), (f)(1)(ii)(B), and (f)(2)(iii)). The analysis must identify the gaps between the cost of care and subsidy levels adopted by the state and then be considered as part of the rate setting process.

Note: Any Lead Agency considering using an alternative methodology, instead of a MRS rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08>). Advance approval is not required if the Lead Agency plans to implement both a MRS and an alternative methodology.

A MRS or an ACF pre-approved alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan (658E(c)(4)(B)(i) (98.45 (c)). Due to the COVID-19 pandemic, Lead Agencies may request a waiver for up to one additional year (until July 1, 2022) to complete the required MRS or an ACF pre-approved alternative methodology. Lead Agencies may also request the required Narrow Cost Analysis be waived for one year (until July 1, 2022). These waiver requests must include a justification linked to the COVID-19 pandemic.

4.2.1 Completion of the MRS or ACF pre-approved alternative methodology.

Did the state/territory conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology?

Yes. If yes, please identify the methodology(ies) used below to assess child care prices and/or costs.

a. MRS.

When was your data gathered (provide a date range, for instance, September - December, 2019)?

February - March 2021

b. ACF pre-approved alternative methodology.

Identify the date of the ACF approval and describe the methodology:

No, a waiver is being requested in Appendix A.

a. Please identify the Lead Agency's planned methodology(ies) to assess child care prices and/or costs.

i. MRS.

If checked, describe the status of the Lead Agency's implementation of the MRS.

ii. ACF pre-approved alternative methodology.

If checked, describe the status of the Lead Agency's implementation of the ACF pre-approved alternative methodology, including if applicable, the date of the ACF approval and a description of the methodology:

b. If a waiver is requested, Lead Agencies will need to respond to questions 4.2.2- 4.5.2 based on data collected for the FY 2019-2021 CCDF Plan or any data collected since then. Identify the date of the Lead Agencies' most recent and complete Market Rate Survey or ACF pre-approved alternative methodology that will provide data to inform responses to questions 4.2.2 - 4.5.2.

4.2.2 Prior to developing and conducting the MRS, or conducting the ACF pre-approved alternative methodology, the Lead Agency is required to consult with (1) the State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities, and (2) organizations representing caregivers, teachers, and directors (98.45 (e)). Local child care program administrators may also be good informants to Lead Agencies on narrow cost analyses.

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

The Lead Agency discussed the CCDF 2019-21 requirements with the State Advisory Council (SAC) and invited SAC members to provide input on the content of the Market Rate Survey.

b) Local child care program administrators:

Notification was sent to all licensed child care programs who accept private pay families

regarding the upcoming MRS. The notification included Information on the survey questions and the purpose of the MRS. Providers were encouraged to contact the Lead Agency with questions or comments.

c) Local child care resource and referral agencies:

Notification on the Market Rate Survey was sent to Oklahoma Child Care Resource and Referral Association to distribute to the regional organizations.

d) Organizations representing caregivers, teachers, and directors:

Notification was sent to child care programs and various child care associations regarding the MRS and the survey questions. The State Advisory Council was notified that DHS Child Care Services had a MRS planned for October 2020. However, the MRS was delayed until February-March 2021 due to multiple factors including COVID-19.

e) Other. Describe:

DHS regularly consults with cross-agency bodies through the Child Care Advisory committee, State Advisory Council, Tribal Child Care Association and Partners meetings. Public hearings are held prior to rate increases in child care subsidy. Several rate increases and public hearings have occurred since the last MRS giving the stakeholders a chance to comment publicly on subsidy rates.

4.2.3 ACF has established a set of benchmarks, largely based on research, to identify the components of a valid and reliable market rate survey (81 FR, p. 67509). To be considered valid and reliable a Market Rate Survey or preapproved alternative methodology meets the following:

- represents the child care market
- provides complete and current data
- uses rigorous data collection procedures
- reflects geographic variations
- analyzes data in a manner that captures other relevant differences

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market.

a. Describe how each of the benchmarks are met in either the MRS or ACF pre-approved alternative methodology.

i. Represent the child care market: [Click or tap here to enter text.](#)

A total of 2,134 facilities who accept private pay were included in the target population. Of the 2,134 facilities, 55 could not participate because they were no longer in business, had a disconnected or wrong telephone number. There were 319 facilities refusing to participate or terminating the interview and 444 could not be contacted. At the end of the data collection period, 1,316 interviews were completed for a response rate of 63.3%.

ii. Provide complete and current data:

Providers were surveyed on private pay enrollment and full time costs by child's age.

iii. Use rigorous data collection procedures:

Providers were notified by the Lead Agency in advance that they would be contacted by phone regarding the MRS. They were also provided information about the data that would be collected when they were contacted. Data collection began February 23, 2021 and ended March 18, 2021 for a total of nineteen business days of interviewing. Interviews were conducted Monday through Friday, generally between the hours of 8:00 AM and 5:00 PM. Upon request, a limited number of interviews were conducted after standard business hours. Three attempts were made to contact each provider.

iv. Reflect geographic variations:

Attempts were made to contact all programs statewide that accept private pay families.

v. Analyze data in a manner that captures other relevant differences:

The MRS also collects information regarding whether programs charge an enrollment or registration fee and the amounts.

b. Given the impact of COVID-19 on the child care market, do you think that the data you gathered (as indicated in 4.2.1) on the prices or costs of child care adequately reflect the child care market as you submit this plan?

No

Yes.

If yes, why do you think the data represents the child care market?

Because the market rate survey was delayed until February-March 2021, most child care facilities around the state had resumed operations. As a result, the Lead Agency believes the data accurately reflects the child care market in Oklahoma. To assure accuracy of the MRS, the Lead Agency conducted an analytical comparison of the rate data collected by the Oklahoma Child Care Resource and Referral Agency and the MRS. There was no substantial variation.

4.2.4 Describe how the market rate survey or ACF pre-approved alternative methodology reflects variations in the price or cost of child care services by:

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

The Lead Agency went to a single statewide rate since the last MRS was conducted and no longer takes into account geographic location. To accomplish this, subsidy rates were increased for programs who received the "standard county" rate (typically located in rural areas) to match the "enhanced county" rate (typically located in urban areas). In addition, the implementation of a single statewide rate was meant to address child care deserts and incentivize increased supply in rural areas.

b) Type of provider. Describe:

All child care MRS data was collected by age, facility type and the Star rating.

c) Age of child. Describe:

All child care MRS data was collected by age, facility type and the Star rating.

d. Describe any other key variations examined by the market rate survey or ACF pre-approved alternative methodology, such as quality level.

The MRS data is collected and analyzed by Star level. The Lead Agency categorizes rates by the Star rating of the provider. Differential rates are offered for ratings of 1 Star, 1 Star Plus, 2 Star and 3 Star.

4.2.5 Has the Narrow Cost Analysis been completed for the FY 2022 - 2024 CCDF Plan?

- No, a waiver is being requested in Appendix A. If no, describe the status of the Lead Agency's upcoming narrow cost analysis.
- Yes, the narrow cost analysis information is included in the report as described in 4.2.6. If yes, describe how the State/Territory analyzed the cost of child care through a narrow cost analysis for the FY 2022 - 2024 CCDF Plan, including:

a. The methodology the Lead Agency used to conduct, obtain, and analyze data on the estimated cost of care (narrow cost analysis), including any relevant variation by geographic location, category of provider, or age of child (98.45 (f)(ii)).

The Lead Agency used a recently completed Cost of Quality study conducted by the Rand Corporation in consultation with the State Advisory Council (Oklahoma Partnership for School Readiness). A cohort of providers was sampled to capture variations in provider type, geographic location, quality rating according to the State's QRIS, and age of child.

b. How the methodology addresses the cost of child care providers' implementation of health, safety, quality and staffing requirements (i.e. applicable licensing and regulatory requirements, health and safety standards, training and professional development standards, and appropriate child to staff ratio, groups size limits, and caregiver qualification requirements (98.45 (f)(ii)(A)).

Only state licensed providers were included in the study.

c. How the methodology addresses the cost of higher-quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality (98.45 (f)(ii)(B)).

The study analyzed costs based on the provider's participation in the state's QRIS system. All levels of the QRIS were represented in the analysis.

d. The gap between costs incurred by child care providers and the Lead Agency's payment rates based on findings from the narrow cost analysis.

Results of the study indicate there is wide variation in program operations across the sampled providers, resulting in considerable differences in recovery of costs per child based on the state's payment rates.

4.2.6 After conducting the market rate survey or ACF pre-approved alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology. The detailed report must also include the Narrow Cost Analysis, as described in 4.2.5, which estimates the cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers implementation of the health, safety, quality, and staffing requirements, and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For states without a QRIS or for a state with a QRIS system that is currently limited to only certain providers, those states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, school-age quality standards, or state defined quality measures.)

The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public or stakeholders.

Describe how the Lead Agency made the results of the market rate survey or ACF pre-approved alternative methodology report widely available to the public (98.45(f)(1)) by responding to the questions below.

- a. Date the report containing results was made widely available - no later than 30 days after the completion of the report. May 19, 2021
- b. Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

OKDHS shared the MRS results through website posts, partner agencies and organizations involved in early childhood education. OKDHS shared results of the Market Rate Survey with the Oklahoma Tribal Child Care Association so they may utilize the results to formulate tribal CCDF plans.

<https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-pdf-library/adult-and->

[family-services/2021%20Market%20Rate%20Report.pdf](#)

c. Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

The MRS was discussed at Partners meeting, the Oklahoma Tribal Child Care Association, and the State Advisory Council. All stakeholder feedback and suggestions were considered in developing the final survey. To assure accuracy of the MRS, Child Care Services conducted an analytical comparison of the rate data collected by The Oklahoma Child Care Resource and Referral Association and the MRS. There was no substantial variation.

4.3 Establish Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or ACF pre-approved alternative methodology, as identified in 4.2.1, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF assistance. Lead Agencies must also consider the costs of base and higher quality care at each level as part of its rate setting. The Lead Agency must re-evaluate its payment rates at least every 3 years.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

Lead Agencies are required to provide a summary of data and facts in their Plan to demonstrate how its payment rates ensure equal access. The preamble to the final rule (81 FR, p. 67512), indicates that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure that eligible children have access to three out of four child care slots.

The 75th percentile benchmark applies to the base rates. Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes). Further, base rates must be sufficient to ensure that minimum health and safety and staffing requirements are covered.

Percentiles are not required if the Lead Agency conducted an ACF pre-approved alternative methodology, but must be reported if the Lead Agency conducted a MRS. For states that conduct an ACF pre-approved alternative methodology, report the base payment rates based on a full-time weekly rate.

The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please use the most populous geographic region (defined as the area serving highest number of CCDF children) to report base payment rates below.

a. Provide the base payment rates and percentiles based on either the statewide rates or the most populous area of the state (area serving highest number of children accessing CCDF). To facilitate compiling state by state payment rates, provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

i. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Center care:

Base payment rate:\$38.00 per day

Full-time weekly base payment rate: \$190.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 68.91%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

ii. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Center care:

Base payment rate:\$33.60 per day

Full-time weekly base payment rate: \$168.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 61.66%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

iii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Center care:

Base payment rate:\$22.80

Full-time weekly base payment rate: \$114.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 29.45%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

iv. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Center care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:\$18.80

Full-time weekly base payment rate: \$94.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 55.02%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

v. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Family Child Care:

Base payment rate:\$28.60

Full-time weekly base payment rate: \$143.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 46.32%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

vi. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Family Child Care:

Base payment rate:\$28.60

Full-time weekly base payment rate: \$143.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 46.32%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

vii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Family Child Care:

Base payment rate:\$22.80

Full-time weekly base payment rate: \$114.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 30.19%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

viii. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Family Child Care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:\$18.20

Full-time weekly base payment rate: \$91.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 37.21%

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?

b. If the Lead Agency does not publish weekly rates then how were these rates calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)?

The daily rates were multiplied by five.

c. Describe how the Lead Agency defines and calculates part-time and full-time care.

Full time care is over four hours. Part time care is four hours or less per day. Oklahoma also approves a blended rate for school age children who need part time care on school days and full time care on school holidays. The blended rate pays more than a part time rate but less than a full time rate.

d. Provide the date these current payment rates became effective (i.e., date of last update based on most recent MRS as reported in 4.2.1). August 1, 2018.

e. If applicable, identify the most populous area of the state (area serving highest number of children accessing CCDF) used to complete the responses above.

f. Provide the citation, or link, if available, to the payment rates

<https://oklahoma.gov/okdhs/services/child-care-services/parents-families/pfbenefits.html>

g. If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

a. Geographic area.

Describe:

b. Type of provider.

Describe:

Rates may vary based on type of provider: center, family child care home, or in-home

c. Age of child.

Describe:

Providers are paid a higher rate for younger children and a lower rate for older children.

d. Quality level.

Describe:

Providers are paid a higher rate for higher quality rating levels.

e. Other.

Describe:

4.3.3 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children). Lead Agencies may pay providers more than their private pay rates as an incentive or to cover costs for higher quality care (81 FR, p. 67514).

Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

No.

Yes. If yes, identify below any tiered or differential rates, and at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply.

a. This option should not be selected if the answer above is "Yes" -- Tiered or differential rates are not implemented.

Describe:

b. Differential rate for non-traditional hours.

Describe:

A non-traditional hours payment can be made when the child attends full-time on

weekdays and at least two of those hours fall between 6:00 PM and 6:00 AM. A non-traditional hour's payment can also be made for full time care on weekends. The non-traditional hour's payment is paid in addition to the regular full time rate for the child.

- c. Differential rate for children with special needs, as defined by the state/territory.

Describe:

To qualify for a special needs rate, the child must meet the DHS definition of a child with disabilities per OAC 340:40-7-3.1 In addition the child and provider must meet certification requirements indicating the child meets a certain level of care and the provider is capable of providing that level of care. A special needs rate, when approved, is paid in addition to the rate paid for a typically developing child of the same age.

- d. Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- e. Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- f. Differential rate for higher quality, as defined by the state/territory.

Describe:

Oklahoma pays higher subsidy rates for higher quality. Oklahoma uses a tiered reimbursement program designed to improve child care beyond the basic licensing criteria.

- g. Other differential rates or tiered rates.

Describe:

4.3.4 Establishment of adequate payment rates.

a. Describe how base payment rates are adequate and enable providers to meet health, safety, quality, and staffing requirements under CCDF, and how they were established based on the most recent MRS or ACF pre-approved alternative methodology and the Narrow Cost Analysis, as reported in 4.2.1 and 4.2.5.. In determining compliance with the Act for the equal access provisions in the FY2019-2021 CCDF Plan, the OCC reviewed all the states with payment rates below the 75th percentile benchmark. Of those states, the half with the lowest payment rates were considered non-compliant and placed on a corrective action plan (CAP). These states all had rates below the 25th percentile for either some or all categories of care. The 25th percentile is not to be viewed as a benchmark or a long-term solution to gauge equal access. It is also not to be viewed as sufficient for compliance in future plan cycles. OCC expects to continue to take action against states with the lowest rates in future plan cycles in an effort to keep payment rates moving upward toward ensuring equal access. Note: Per the preamble (81 FR p. 67512), in instances where an MRS or ACF pre-approved alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

The 2021 Market Rate Survey (MRS) is the basis for identifying child care rates at the targeted percentile of full-time child care subsidy rates. The term "market rate" is defined as the agreed upon pricing point in an open market between a child care provider and a private pay family for child care services. The agreed upon price is evidenced by actual enrollment at the pricing point. Based on the results of the last Market Rate Survey (2017), DHS implemented two major rate increases focusing on infants and toddlers in high quality settings. The first increase, which went into effect 8-1-2018, increased rates for children ages birth through three to the 65th percentile. The second major increase was effective 4/1/2020 and increased infant-toddler care to the 75% at three star programs based on the 2017 MRS. Oklahoma also doubled the special needs add-on rate and established several new rates, including a non-traditional hour's add-on rate and a foster care add-on rate. All of these rate increases were made possible by increases in CCDF funding received by the State. The recently completed 2021 MRS has identified that the Lead Agency's subsidy rates have fallen in comparison to the private pay rates charged by providers who participated in the MRS. As a result, the Lead Agency plans to

increase rates in conjunction with the rollout of the revamped QRIS system.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

For past rate increases, the Lead Agency took into account the most recent Market Rate Survey and the cost of care based on calculations from the Provider Cost of Quality Calculator on the Office of Child Care Website. For future rate increases, the Lead Agency will take into account the 2021 Market Rate Survey and the narrow cost analysis. In response to the pandemic, the Lead Agency temporarily increased provider rates to compensate for increased costs including a rate increase of \$5 per day per child, increased absent days and full time payment for school age children. All COVID-19 subsidy related financial initiatives are ongoing. The Lead Agency also distributed sanitation and stabilization grants during the pandemic.

4.3.5 Describe how the Lead Agency took the cost of higher quality, as determined in 4.2.5, into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For states without a QRIS, the states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, or state-defined quality measures).

The Star status of a facility is determined by Child Care Services Licensing staff based on certain quality indicators. The higher the star status the higher the reimbursement rate. The Lead Agency will take into account the 2021 MRS and narrow cost analysis when determining future rate increases.

4.3.6 Identify and describe any additional facts that the Lead Agency considered in determining its payment rates ensure equal access. If applicable, provide a description of how any additional health and safety costs, because of the COVID-19 pandemic are

included in rate setting.

NA

4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)). Responses may also identify any additional health and safety fees providers are charging as a result of COVID-19.

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5);

98.45(l)(6)).

4.4.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

a. Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

i. Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

ii. Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

The Lead Agency uses an electronic benefits transfer (EBT) system statewide. Payment for service is based on the time and attendance information that the parent documents by swiping his or her EBT card through the point of service (POS) machine on a daily basis. Weekly payments are direct deposited into the provider's bank account for attendance two weeks in arrears, which allows the client 10 days to complete or correct swipes.

b. To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

i. Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

ii. Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

iii. Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

Parents who need full time care may qualify for the weekly rate which pays for up to 7 absent days as long as the child attends a minimum number of days each month.

iv. Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

c. The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

A part-time rate is approved when the child needs four hours or fewer per day. A full-time rate is approved when the child needs more than four hours but less than 24 hours per day. Oklahoma also approves a blended rate for school age children who need part time care on school days and full time care on school holidays. The blended rate pays more than a part time rate but less than a full time rate.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

Data on registration fees was collected in the 2021 MRS. Based on data from the 2021 MRS, 60% of facilities did not charge a registration fee. Charging a mandatory registration fee is not a generally accepted practice in Oklahoma.

d. The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees

charged to providers, including fees related to COVID 19, and the dispute-resolution process. Describe:

Providers enter into a written payment agreement with the Lead Agency's EBT contractor which includes payment policies and any fees. In addition, providers enter into a subsidy contract with the Lead Agency which details the responsibilities and references rates and schedules located on the Lead Agency's website at www.okdhs.org.

e. The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

Computer-generated notice is mailed to providers for all approvals, closures, and changes to child care authorizations. In addition, providers can access the Provider Web for real time information about authorizations of children in their care.

f. The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Upon notification of a payment inaccuracy or dispute, the Lead Agency finance division reviews the problem and attempts to resolve all payment issues as soon as possible, usually within a week.

g. Other. Describe:

NA

4.4.2 Do payment practices vary across regions, counties, and/or geographic areas?

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

4.4.3 Describe how Lead Agencies' payment practices described in subsection 4.4 support equal access to a full range of providers.

DHS payment rates for care and payment practices are uniform across the state so that families have access to a wide range of providers. DHS does not have a waiting list and all eligible families requesting subsidy are assisted in locating licensed child care. Fifty-nine percent of licensed providers in Oklahoma accept children who receive subsidies.

4.5 Establish Affordable Co-Payments

Family co-payments are addressed in Section 3 related to minimum 12-month eligibility and the graduated phase-out provision and also in this subsection, because they are an important element for determining equal access. If a Lead Agency allows providers to charge amounts more than the required family co-payments, the Lead Agency must provide a rationale for this practice, including how charging such additional amounts will not negatively impact a family's ability to receive care they might otherwise receive, taking into consideration a family's co-payment and the provider's payment rate.

4.5.1 How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF services (98.16 (k))? Check all that apply

- a. Limit the maximum co-payment per family.

Describe: .

When the Lead Agency restructured the Child Care Eligibility/Copayment Chart in March 2019, copayments were limited to no more than 7% of household income based on family size. This benchmark is periodically updated to ensure copayments remain affordable.

- b. Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

c. Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.2.5.

d. Other.

Describe:

The Lead Agency's entry threshold is set at 85% of SMI so that all families who meet the federal income guidelines are eligible for child care subsidies. In addition, Oklahoma locks-in copayments at certification in accordance with federal regulations so that copayments cannot be increased over the 12 month eligibility period.

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for all child care providers in a state or territory and then moves to focus specifically on CCDF providers who may be licensed, or those exempt from licensing. The next section addresses child-staff ratios, group size limits, and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children. The section then covers the health and safety requirements; standards, training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Finally, Lead Agencies are asked to describe any exemptions for relative providers (98.16(l)). In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt. In either case, Lead Agencies are expected to identify and describe health and safety requirements for all providers receiving CCDF.

Note: When responding to questions in this section, the OCC recognizes that each state/territory identifies and defines its own categories of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important

to note that these requirements apply to all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check, identify, and describe all that apply, and provide a citation to the licensing rule.

a. Center-based child care.

i. Identify the providers subject to licensing:

The following programs are licensed: (1) Child care centers-programs that operate 30 or more hours per week. (2) Day camps-programs that operate during school breaks for 12 hours or less per day, serve children 5-year-olds and older who are attending, or have completed kindergarten or above, and use the outdoors as a major program component for at least 50 percent of the daily hours of operation. (3) Drop-in Program-programs that operate 30 or more hours per week with individual children attending six hours or less per day and 24 hours or less per week, with an allowance for three extra six-hour days per 12 months per child. (4) Out-of-school time programs-means

programs that operate when school is not in session, such as before- and after-school and school breaks, and serve 3-year-olds and older who are attending or have completed Pre-Kindergarten or above. (5) Part-day programs-programs that operate for more than 15, but less than 30 hours per week. (6) Programs for sick children-programs that serve children with illnesses or symptoms preventing them from comfortable participation in activities in a program caring for children who are well. The children require more care than personnel in a program caring for children who are well can provide without compromising the health and safety of other children in care. Community Hope Centers are programs operating more than 15 hours per week, serving children and youth five through 17 years of age. Programs provide access to mental health professionals and resources meeting children's and youths' social and emotional well-being, the science of hope, and connections to additional community resources for families.

ii. Describe the licensing requirements:

The six types of center-based programs are required to meet Licensing requirements found in Oklahoma Administrative Code (OAC) 340:110-3-275 through 311.

Requirements ensure the health and safety standards for children in a child care center-based setting. Community Hope Centers are required to meet Licensing requirements found in OAC 340:110-3-400. Requirements ensure health and safety standards for children and youth five through 17 years of age.

iii. Provide the citation:

Oklahoma Administrative Code (OAC) 340:110-3-275 through 311 and 340:110-3-400

b. Family child care. Describe and provide the citation:

i. Identify the providers subject to licensing:

Family child care home-a family home that provides care and supervision for seven or fewer children for part of the 24-hour day. Large family child care home-a residential family home that provides care and supervision for eight to 12 children for part of the 24- hour day.

ii. Describe the licensing requirements:

Family child care homes are required to meet Licensing requirements found in

Oklahoma Administrative Code (OAC) 340:110-3-80 through 97.1. Requirements ensure health and safety standards for children in a home-based environment.

iii. Provide the citation:

OAC 340:110-3-80 through 97.1

c. In-home care (care in the child's own) (if applicable):

i. Identify the providers subject to licensing:

ii. Describe the licensing requirements:

iii. Provide the citation:

5.1.2 Identify the CCDF-eligible providers who are exempt from licensing requirements. Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. Describe how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Do not include exempt relative care providers, this information will be collected in Section 5.6.

a. License-exempt center-based child care. Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible center-based child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

The provisions of the Oklahoma Child Care Facilities Licensing act shall not apply to
1) Programs that serve children three (3) years of age and older and that are operated during typical school hours by a public school district; 2) Programs that serve children three (3) years of age and older and that are operated during typical school hours by a private school that offers elementary education in grades kindergarten through third grade; 3) Summer youth camps, summer programs or after-school programs for

children who are at least four (4) years of age, that are accredited by a national standard setting agency or church camp accreditation program, or are accredited by, chartered by or affiliated with a national non-profit organization; 4) Programs in which children attend on a drop-in basis and parents are on the premises and readily accessible; 5) A program of specialized activity or instruction for children that is not designed or intended for child care purposes including, but not limited to, scouts, 4-H clubs and summer resident youth camps, programs that limit children from enrolling in multiple sessions because of the type of activity or ages accepted and single activity programs such as academics, athletics, gymnastics, hobbies, art, music, dance and craft instruction; 6) Any child care facility that: a. provides care and supervision for fifteen (15) or fewer hours per week, b. operates less than ten (10) weeks annually, c. operates in the summer for less than eight (8) hours per day, or d. provides care and supervision for school-aged children only in a center-based program for twenty-one (21) or fewer hours a week and is located in a county with a population of less than one hundred thousand (100,000) according to the latest Federal Decennial Census; 7) Facilities whose primary purpose is medical treatment; 8) A program where children are not enrolled by the parents and are free to come and go; 9) A program in tribal land as defined at 25 U.S.C.A. 1903 (10) ; and 10, A program on a military base or federal property.

[ii. Provide the citation to this policy:](#)

Oklahoma Administrative Code (OAC) 340:110-1-5

[iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.](#)

The Oklahoma Licensing Act exempts programs that limit the time children attend; do not meet the intent of child care; or are accredited through national organizations or federal agencies that have health and safety requirements.

[b. License-exempt family child care. Describe and provide the citation by answering the questions below.](#)

[i. Identify the CCDF-eligible family child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to](#)

[the exemption:](#)

The provisions of the Oklahoma Child Care Facilities Licensing Act shall not apply to:

- 1) Care provided in a child's own home or by relatives; 2) Informal arrangements which parents make with friends or neighbors for the occasional care of their children;
- 3) Programs in which school-aged children three (3) years of age and older are participating in home-schooling; 4) Any child care facility that: a. provides care and supervision for fifteen (15) or fewer hours per week, b. operates less than ten (10) weeks annually, c. operates in the summer for less than eight (8) hours per day; 5) A program on tribal land as defined at 25 U.S.C.A. 1903 (10); and 6) a program on a military base or federal property.

[ii. Provide the citation to this policy:](#)

Oklahoma Administrative Code (OAC) 340:110-1-5

[iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.](#)

The Oklahoma Licensing Act exempts programs that limit the time children attend; do not meet the intent of child care; or are accredited through national organizations or federal agencies that have health and safety requirements.

[c. In-home care \(care in the child's own home by a non-relative\): Describe and provide the citation by answering the questions below.](#)

- [i. Identify the CCDF-eligible in-home child care \(care in the child's own home by a non-relative\) providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption.](#)

The provisions of the Oklahoma Child Care Facilities Licensing Act shall not apply to care provided in a child's own home or by relatives.

[ii. Provide the citation to this policy:](#)

Oklahoma Administrative Code (OAC) 340:110-1-5

[iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.](#)

The Oklahoma Licensing Act exempts programs that limit the time children attend; do not meet the intent of child care; or are accredited through national organizations or federal agencies that have health and safety requirements.

5.2 Standards for Ratios, Group Size and Qualifications for CCDF Providers

Lead Agencies are required to have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.6.

5.2.1 Describe how the state/territory defines the following age classifications. For instance, Infant: 0-18 months.

a. Infant. Describe:

Birth up to 12 months

b. Toddler. Describe:

1 -2 year-olds

c. Preschool. Describe:

3 - 4 year-olds

d. School-Age. Describe:

5 - 12 year-olds

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

a) Licensed CCDF center-based care

i. Infant

A. Ratio:

One teaching personnel for 4 infants.

B. Group size:

Maximum of 8 infants.

ii. Toddler

A. Ratio:

One teaching personnel for 6 one-year-olds; and 1 teaching personnel for 8 two-year-olds.

B. Group size:

Maximum of 12 one-year-olds; and 16 two-year-olds.

iii. Preschool

A. Ratio:

One teaching personnel for 12 three-year-olds; one teaching personnel for 15 four-year-olds.

B. Group size:

Maximum of 24 three-year-olds; and 30 four-year-olds.

iv. School-age

A. Ratio:

One teaching personnel for 20 five-year-olds and older.

B. Group size:

Maximum of 40 five-year-olds and older.

v. Mixed-Age Groups (if applicable)

A. Ratio:

Infants, 1 year-olds, and 2-year-olds only, 1:6 ratio with no more than two infants per teaching personnel. Infants and older, 1:8 ratio with no more than two under 2 years of age per teaching personnel. 1 year-olds and older, 1:8 ratio with no more than two 1 year-olds per teaching personnel. 2-year-olds and older, 1:12 ratio with no more than four 2-year-olds per teaching personnel. 3-year-olds, 1:15 ratio with no more than six 3-year-olds per teaching personnel. 4-year-olds and older, 1:18 ratio with no more than eight 4-year-olds per teaching personnel. 5-year-olds and older, 1:20 ratio. Community Hope Center ratios: Children 5 through 12 years of age, 1:20 ratio. Youth 13 through 17 years of age, 1:25 ratio.

B. Group size:

Infants, 1 year-olds, and 2-year-olds only, maximum group size of 12. Infants and older, maximum group size of 16. 1 year-olds and older, maximum group size of 16. 2 year-olds and older, maximum group size of 24. 3-year-olds and older, maximum group size of 30. 4-year-olds and older, maximum group size of 36. 5-year-olds and older, maximum group size of 40. Community Hope Centers have no group size requirements.

vi. If any of the responses above are different for exempt child care centers, describe the ratio and group size requirements for license-exempt providers.

Providers that are exempt are not required to meet licensing ratios regarding child ages and group sizes.

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

b. Licensed CCDF family child care home providers:

i. Mixed Groups

A. Ratio:

A family child care home with only one caregiver present, the total number of children is seven children, with no more than two children younger than 2 years of age, six children, with no more than three children younger than 2 years of age, or five children of any age. Two caregivers are required when seven children are in care and more than two children are younger than 2 years of age or six children are in care and more than three children are younger than 2 years of age. In a large family child care home, one caregiver may care for up to five children of any age, six children with no more than three children younger than 2 years of age, seven children with no more than two children younger than 2 years of age, seven children, when the children are 2 years of age and older, eight children, when the children are 3 years of age and older, 10 children, when the children are 4 years of age and older, or 12 children, when the children are 5 years of age and older. Two caregivers may care for up to eight children younger than 2 years of age, or 12 children, with no more than six children younger than 2 years of age. Three caregivers may care for up to 12 children, with no more than eight children younger than 2 years of age.

B. Group size:

There is no maximum group size for mixed-age groups in a family child care home. Caregivers are limited in the amount of children they may care for based on ages of children, number of caregivers present and licensed capacity.

ii. Infant

A. Ratio:

A family child care home with one caregiver may care for up to 5 infants.

B. Group size:

A family child care home with one caregiver may care for up to 5 infants, seven children with no more than two children younger than 2 years of age, or six children with no more than three children younger than 2 years of age. Two caregivers are required when seven children are in care and more than two children are younger than 2 years of age or six children are in care and more than three children are younger than 2 years of age. A large family child care home with one caregiver may care for up to 5 children of any age; up to 6 children with no more than 3 children younger than 2 years of age; up to 7 children with no more than 2 children younger than 2 years of age. Two caregivers may care for up to 8 children younger than 2 years of age; or 12 children with no more than 6 children younger than two-years of age. Three caregivers may care for up to 12 children with no more than 8 children younger than 2 years of age.

iii. Toddler

A. Ratio:

A family child care home with one caregiver may care for up to five 1-2-year-olds.

B. Group size:

A family child care home with one caregiver may care for up to 5 children, seven children with no more than two children younger than 2 years of age, or six children with no more than three children younger than 2 years of age. Two caregivers are required when seven children are in care and more than two children are younger than 2 years of age or six children are in care and more than three children are younger than 2 years of age. A large family child care home with one caregiver may care for up to 5 children of any age; up to 6 children with no more than 3 children younger than 2 years of age; up to 7 children with no more than 2 children younger than 2 years of age. Two caregivers may care for up to 8 children younger than 2 years of age; or 12 children with no more than 6 children younger than two-years of age. Three caregivers may care for up to 12 children with no more than 8 children younger than 2 years of age.

iv. Preschool

A. Ratio:

One caregiver may care for up to 7 children ages 3 and older.

B. Group size:

A family child care home with one caregiver may care for up to 7 children if all children are ages 3 and older. A large family child care home with one caregiver may care for up to 8 children when children are 3 years of age and older; up to 10 children when the children are 4 years of age and older; and up to 12 children when the children are 5 years of age and older.

v. School-age

A. Ratio:

A family child care home with one caregiver may care for up to 7 children. A large family child care home with one caregiver may care for up to 12 children when the children are 5 years of age and older.

B. Group size:

A family child care home with one caregiver may care for up to 7 children if all are ages 3 and older. A large family child care home with one caregiver may care for up to 8 children when children are 3 years of age and older; up to 10 children when the children are 4 years of age and older; and up to 12 children when the children are 5 years of age and older.

vi. If any of the responses above are different for exempt child care homes, describe the ratio and group size requirements for license-exempt family child care home providers.

NA

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

c. Licensed in-home care (care in the child's own home):

i. Mixed Groups (if applicable)

A. Ratio:

These programs are not licensed.

B. Group size:

These programs are not licensed.

ii. Infant (if applicable)

A. Ratio:

These programs are not licensed.

B. Group size:

These programs are not licensed.

iii. Toddler (if applicable)

A. Ratio:

These programs are not licensed.

B. Group size:

These programs are not licensed.

iv. Preschool (if applicable)

A. Ratio:

These programs are not licensed.

B. Group size:

These programs are not licensed.

v. School-age (if applicable)

A. Ratio:

These programs are not licensed.

B. Group size:

These programs are not licensed.

vi. Describe the ratio and group size requirements for license-exempt in-home care.

These programs are not licensed.

5.2.3 Provide the teacher/caregiver qualifications for each category of care.

a. Licensed Center-Based Care

i. Describe the teacher qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care:

Teaching personnel are at least 18 years of age, have at least a high school diploma/GED/or a licensing approved equivalent or completed 10th grade and are in process of obtaining a GED for a period not to exceed 12 months from employment. Assistant teacher qualifications are at least 16 years of age, currently enrolled in high school or an equivalent or have at least a high school diploma/GED or Licensing approved equivalent or have completed 10th grade and are in process of obtaining a GED for a period not to exceed 36 months from employment. Community Hope Centers: Personnel possess adequate education, professional development, and experience to perform the position's essential functions. Personnel are at least 18 years of age and have a high school diploma or General Education Development (GED).

ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed:

Directors of child care centers are required to be at least 21 years of age and have a high school diploma or GED and have a current Oklahoma's Director Credential. At a minimum, directors have 6 Early Childhood Education/Child Development/School Age credit hours or a Child Development Associates/Child Care Professional or Oklahoma Competency Certificate in Early Childhood Education. Directors have administrative management knowledge and skills determined by completing a minimum of 3 administration/management credit hours or approved administration/management credential or 40 administration/management clock-hours with 12 months experience and 20 hours of job related training. Community Hope Centers: Program or site directors are at least 21 years of age and responsible for the day-to-day program operation. Program or site directors have obtained a bachelor's degree from an accredited college or university with at least nine-college credit hours in family focus, child or youth development, sociology, social work, or a closely related subject, and six months children's and youth's services experience; or in lieu of a bachelor's degree have five years of experience in children's or youth's services; including care of children or youth with complex emotional needs and daily program operations.

iii. If any of the responses above are different for license-exempt child care centers, describe which requirements apply to exempt centers:

Programs that are exempt are not required to meet licensing ratios regarding Director qualifications.

iv. If applicable, provide the website link detailing the center-based teacher and director qualifications.

Director and personnel in charge:

<https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-3/director-and-personnel-in-charge.html> Teaching personnel:

<https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-3/teaching-personnel.html> Appendix EE Oklahoma Director's Credential:

<http://www.okdhs.org/OKDHS%20Form%20Library/EE.pdf> Community Hope Centers:

<https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-3/400communityhopecenter.html>

b. Licensed Family Child Care

i. Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care:

The primary caregiver must be at least 21 years of age, have obtained a high school diploma or GED. In Large Family Child Care Homes, the primary caregiver must be at least 21 years of age, have at least 6 months of satisfactory experience as a primary caregiver in a licensed family child care home in Oklahoma and meet one of the requirements: a high school diploma/GED and 12 college credit hours in child development or early childhood education, an Oklahoma Competency Certificate, a Child Development Associate (CDA) credential, a Certified Childcare Professional (CCP) credential; or an associate or bachelor's degree in child development or early childhood education.

ii. If any of the responses above are different for license-exempt family child care homes, describe which requirements apply to exempt homes:

Programs that are exempt are not required to meet licensing ratios regarding provider qualifications.

iii. If applicable, provide the website link detailing the family child care home provider qualifications:

Caregiver Requirements: <https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-3/parts-5/caregiver-requirements.html> Requirements for Large family child care homes: <https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-3/parts-5/requirements-for-large-family-child-care-homes.html>

c. Regulated or registered In-home Care (care in the child's own home by a non-relative)

i. Describe the qualifications for licensed in-home child care providers (care in the child's own home) including any variations based on the ages of children in care:

In-home-care is not licensed by the Lead State.

- ii. If any of the responses above are different for license-exempt in-home care providers, describe which requirements apply to exempt in-home care providers:
In-home-care is not licensed by the Lead State.

5.3 Health and Safety Standards and Training for CCDF Providers

5.3 Health and Safety Standards and Training for CCDF Providers

The state/territory must describe its requirements for pre-service or orientation training and ongoing training. Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served. This training must address the required health and safety topics (658E(c)(2)(l)(i) and the content area of child development. Lead Agencies have flexibility in determining the number of training hours to require, and they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Lead Agencies must also have ongoing training requirements for caregivers, teachers, and directors who are caring for children receiving CCDF funds (658E(c)(2)(l)(i); 98.44(b)(1)(iii)). Lead Agencies are to report the total number of ongoing training hours that are required each year, but they do not have to report these hours out by topic (658E(c)(2)(G)(iii)). Ongoing training requirements will be addressed in 5.3.13.

Both preservice/orientation and ongoing trainings should be a part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory.

States and territories must have health and safety standards

for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined in 98.2. Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)). Exemptions for relative providers' standards and training requirements

will be addressed in question 5.6.3.

To certify, describe the following health and safety requirements for programs serving children receiving CCDF assistance on the following topics (98.16(l)) identified in questions 5.3.1 - 5.3.12. Note: Monitoring and enforcement will be addressed in subsection 5.4.

5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standards and training requirements.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care and family child care home standards require prevention and control of infectious diseases (including immunizations) specifically addressing hand hygiene, requiring immunizations, health monitoring, practices for control of illness and infestations, separation of ill children, and reporting communicable diseases.

Community Hope Center standards require hand hygiene, separation of ill children, practices for control of illness, and health monitoring.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet all health and safety requirements which include prevention and control of infectious diseases. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-280; OAC 340:110-3-281.4; OAC 340:110-3-294.

Family Child Care Homes: OAC 340:110-3-85; OAC 340:110-3-88; OAC 340:110-3-

90. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Center-based programs are the only programs required to have infection control every 12 months.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care and family child care home standards address appropriate sleep environments and rest equipment including sleep positioning, swaddling with written request of parents and restrictions of specific items in rest equipment to prevent sudden infant death syndrome.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Center-based care: play yards are prohibited in programs licensed on or after January 1, 2016. Programs licensed prior to January 1, 2016 may not replace existing rest equipment with a play yard. All CCDF providers are required to meet prevention of sudden death syndrome and the use of safe-sleep practices only when caring for infants. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations. Community Hope Centers are exempt from this requirement as they do not care for infants.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-296; OAC: 340:110-3-302. Family child care homes: OAC 340:110-3-91.1.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family child care home OAC 340:110-3- 85

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Center-based care: All personnel are required to have safe sleep training prior to caring for infants. Family child care homes: Prior to caring for infants, the primary caregiver and individuals caring for infants alone are required to have safe sleep training. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.3 Administration of medication, consistent with standards for parental consent.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, family child care home, and Community Hope Center standards address program policy for administration of medication, parent permission, and labeling and storing medication

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet all administration of medication practices which includes parental consent. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations .

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All CCDF providers are required to meet all administration of medication practices which includes parental consent. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.4 Prevention of and response to emergencies due to food and allergic reactions.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Home standards include prevention of and response to emergencies due to food and allergic reactions including specifically requiring parents to provide child health information upon enrollment that includes allergy information. Programs are required to have access to life-threatening condition medication.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet all prevention and response to emergencies due to food and allergic reactions. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations .

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-281.1; OAC 340:110-3-281.4; OAC 340:110-3-295. Family Child Care Homes: OAC 340:110-3-85; OAC 340:110-3-88. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Providers that are license expemt are not required to meet health and safety requirements.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.5 Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Center, and Family Child Care Home standards require building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic. Specifically the facility is in a good state of repair and maintained in a clean and sanitary condition including being in compliance with building and fire codes. The outdoor play area is enclosed by a fence, is hazard free, and water dangers are inaccessible to children.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet all building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, including electrical hazards, bodies of water, and vehicular traffic. License-exempt

CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-291; OAC 340:110-3-300; OAC 340:110-3-301; OAC 340:110-3-303. Family Child Care Homes: OAC 340:110-3-85; OAC 340:110-3-86; OAC 340:110-3-97. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the

standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.6 Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Home standards address the prevention of shaken baby syndrome, abusive head trauma and child maltreatment by specifically prohibiting a teacher/caregiver from shaking any child in care. Standards also address appropriate behavior guidance and discipline.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are prohibited from using inappropriate discipline that includes shaking any child in care, causing head trauma and child maltreatment. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-288. Family Child Care Homes: OAC 340:110- 3-92. Community Hope Centers: OAC 340:10-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-288. Family Child Care Homes: OAC 340:110- 3-92. Community Hope Centers: OAC 340:10-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License- exempt CCDF providers are monitored by Department of Defense or Tribal Organizations. Community Hope Centers are exempt from the training requirement.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics .

5.3.7 Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Homes are required to meet all emergency preparedness and response planning for emergencies including procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with medical conditions. Additionally standards require policies for emergency plans and procedures for various situations, emergency contacts, first aid supplies, and addressing children's needs. Plans and procedures are reviewed annually.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to conduct emergency preparedness and response planning, staff and volunteer training and practice drills for all emergencies. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-279. Family Child Care Homes: OAC 340:110-3-86.1. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License- exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes.

Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.8 Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Home standards require premises to be free of hazards indoors and out; including medication, weapons, tobacco, cleaning products and toxic materials.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to keep the facility free of hazards, which would include any hazardous materials and appropriate disposal of bio-contaminants.

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-303; OAC 340:110-3-304. Family Child Care Homes: OAC 340:110-3-86; OAC 340:110-3-90. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.9 Precautions in transporting children (if applicable).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Home standards require precautions in transporting children that state children are restrained according to Oklahoma State Statute. When transporting, parent permission is needed and appropriate ratios and supervision of children is maintained at all times. Driver meets qualifications and vehicles are in safe operating condition.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet precautions in transporting children. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-305. Family Child Care Homes: OAC 340:110- 3-87. Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85. Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License- exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to child care centers, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics. The formal child passenger safety training must be obtained from an approved training source.

5.3.10 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, and Family Child Care Home standards require pediatric first aid and CPR certification for all caregivers. Certifications must be kept current and training must be received from an approved source.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

All CCDF providers are required to meet first aid and CPR certification for ages of children in care. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations. Certifications are appropriate to the age of the child in care.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284; OAC 340:110-3-284.1; OAC 340:110-3-284.2. Family Child Care Homes OAC: 340:110- 3-85; OAC 340:110-3-97.1.

Community Hope Centers: OAC 340:110-3-400.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284; OAC 340:110-3-284.1; OAC 340:110-3-284.2. Family Child Care Home OAC 340:110-3- 85; OAC 340:110-3-97.1.

Community Hope Centers: OAC 340:110-3-400

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations. Certifications are appropriate to the age of the child in care.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

As first and CPR training is obtained through approved sources, any updated information would be provided by the training sponsor .

5.3.11 Recognition and reporting of child abuse and neglect. Note: The description must include a certification that child care providers within the state comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Center-based care, Community Hope Centers, Family Child Care Home standards require all personnel to recognize and report suspected child abuse or neglect to the DHS Child Abuse and Neglect Hotline. Standards include punishment for failure to report.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in

care.

Center-based care: 340:110-3-278; OAC 340:110-3-280; OAC 340:110-3-281.1.

Family Child Care Homes: OAC 340:110- 3-85; OAC 340:110-3-89.1. Community

Hope Centers: OAC 340:110-3-400.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Center-based care: OAC 340:110-3-284. Family Child Care Home OAC 340:110-3-85.

Community Hope Centers: OAC 340:110-3-400.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

License-exempt CCDF providers are monitored by Department of Defense or Tribal Organization.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.12 PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b

a. PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b

i. Please enter 'NA' below

Prior to caring for children, personnel in licensed family child care homes must complete training to include all child development principles. Personnel in licensed child care center based program must complete and Entry Level Child Care Training (ELCCT) within three months of employment, ELCCT training includes all domains of child development. Early Child Care Center Programs OAC 340:110-3-284 Family Child Care Homes: OAC 340:110-3-85.

ii. Please enter 'NA' below

For Center-based care the child development category will be added to requirements upon the next requirement revision. However, the Lead Agency-provided orientation DVD contains the child development topic. Community Hope Centers are not required to have child development training. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations .

iii. Please enter 'NA' below

NA

5.3.12 Child Development. Lead Agencies are required to describe in their plan how training addresses child development principles, including the major domains of cognitive, social, emotional, physical development and approaches to learning (98.44(b)(1)(iii)).

b. Pre-Service and Ongoing Training

i. Describe the training content and provide the citation(s) for the training requirement(s). Include citations for both licensed and license-exempt providers

Prior to caring for children, personnel in licensed family child care homes must complete training to include all child development principles. Personnel in licensed child care center based program must complete and Entry Level Child Care Training (ELCCT) within three months of employment, ELCCT training includes all domains of child development. Early Child Care Center Programs OAC 340:110-3-284 Family Child Care Homes: OAC 340:110-3-85.

ii. Describe any variations in training requirements for this topic. Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

For Center-based care the child development category will be added to requirements upon the next requirement revision. However, the Lead Agency-provided orientation DVD contains the child development topic. Community Hope Centers are not required to have child development training. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding this topic? This description should include methods to ensure that providers are able to maintain and update their understanding of child development principles as described in the topic above.

DVDs reviewing health and safety topics are provided to center-based care, Community Hope Centers, and family child care homes for orientation purposes. Updated DVDs are provided to programs upon revisions to health and safety topics. Programs may utilize their own curriculum as long as they include the required health and safety topics.

5.3.13 Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii):

a. Licensed child care centers:

Directors: 20 hours annually; program personnel: 12 hours annually.

b. License-exempt child care centers:

License-exempt CCDF programs meet Department of Defense or Tribal Organization training requirements.

c. Licensed family child care homes:

Primary caregivers: 12 hours annually; Large family child care home primary caregivers: 15 hours annually; assistant caregivers: 12 hours annually.

d. License-exempt family child care homes:

License-exempt CCDF programs meet Department of Defense or Tribal Organization training requirements.

e. Regulated or registered In-home child care:

Relative in-home providers are not required to meet ongoing training requirements.

f. Non-regulated or registered in-home child care:

Relative in-home providers are not required to meet ongoing training requirements.

5.3.14 In addition to the required standards, does the Lead Agency require providers to comply with the following optional standards? If checked, describe the standards, how often the training is required and include the citation. (Please check all that apply)

a. Nutrition:

Describe:

Center-based care, Community Hope Centers, and Family Child Care Home standards require nutritious meals and snacks meet the current Child and Adult Care Food Program. All CCDF providers are required to provide meals and snacks that meet current Child and Adult Care Food Program. Center-based care: OAC 340:110-3-298. Family Child Care Homes: OAC 340:110-3-94. Community Hope Centers: OAC 340:110-3-400. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations. Center-based care standards do not require programs to follow Child and Adult Care Food Program guidelines for infant nutrition.

b. Access to physical activity:

Describe:

Center-based care and Family Child Care Home standards require access to physical activity by providing a balance of quiet and active play, both indoors and outdoors. Center-based care and Community Hope Center standards limit screen time. Center-based care: OAC 340:110-3-289. Family Child Care Homes: OAC 340:110-3-91. Community Hope Centers: OAC 340-110-3-400. Center-based care and family child care home providers are required to provide physical activity. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

c. Caring for children with special needs:

Describe:

Center-based care, Community Hope Centers, and Family Child Care Home standards require caregivers meet specific needs of all children in care including children with disabilities and/or chronic medical conditions. Center-based care: OAC

340:110-3-279 ; OAC 340:110-3-286; OAC 340:110-3-289. Family Child Care Homes: OAC 340:110-3-85; OAC 340:110-3-86.1; OAC 340:110-3-91. Community Hope Centers: OAC 340:110-3-400. Family Child Care Home-caregiver demonstrates a capacity for setting realistic expectations for behavior and performance based on the age, abilities, and special needs of the children. CCDF providers are required to meet specific needs of all children, including caring for children with a special need. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

- d. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

Center-based care, Community Hope Centers, and Family Child Care Home standards require educational knowledge in child development to provide developmentally appropriate activities and experiences to children. Center-based care and Family Child Care Home standards require indoor and outdoor learning activities and experiences that are developmentally appropriate and meet children's individual needs in the areas of social, emotional, cognitive, language, creative expression and physical development. Center-based care: OAC 340:110-3- 289. Family Child Care Homes: OAC 340:110- 85. Community Hope Centers: OAC 340:110-3-400. All CCDF providers are required to have educational knowledge in promoting child development to provide developmentally appropriate activities and experiences to children. License-exempt CCDF providers are monitored by Department of Defense or Tribal Organizations.

5.4 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.4.1 Enforcement of licensing and health and safety requirements.

Lead agencies must certify that procedures are in effect to ensure that all child care providers caring for children receiving CCDF services comply with all applicable state and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings,

any documentation required to be maintained by child care providers, or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.4.2.

a. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Standards as described in Section 5.3.

The Lead Agency Child Care Services is authorized to monitor and inspect licensed child care programs within the state. This is done through full monitoring of programs to ensure compliance with Licensing Requirements for Child Care Programs or Family Child Care Homes through unannounced visits conducted based on the program Monitoring Frequency Plan (MFP).

b. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Training as described in Section 5.3.

Prior to a monitoring visit, Licensing Specialist review any professional development requirements by viewing the Oklahoma Professional Development Registry (OPDR) for registry member staff. For individuals not participating in the OPDR, professional development records are reviewed onsite during monitoring.

c. To certify, describe the procedures to ensure that CCDF providers comply with all other applicable state and local health, safety, and fire standards.

Fire inspection are conducted at least every two years by the local or state fire authority. Health Inspections are conducted at least every two years by the Oklahoma State Department of Health. During monitoring of compliance for requirements, Licensing Specialist follow up on any noted violations.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety,

and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a. Licensed CCDF center-based child care

i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards.

Inquiry regarding licensing of a child care program is referred to the licensing specialist in the area where the potential program is located. Once received, licensing provides the inquirer with copies of applicable licensing requirements and refers to other agencies involved in the process such as fire and health department, local city offices. The program is informed by licensing staff that they may not care for children prior to permission to operate is being given from Child Care Services. When the inquirer indicates an interest to pursue a license to care for children, licensing staff: determines the necessity for a license according to Oklahoma Statutes, reviews the licensing requirements with the inquirer to determine if other requirements can be met, ascertain qualifications of the inquirer to operate a facility, and provides consultation to assist in developing a program which provides quality care. Monitoring visits are completed to the facility to determine compliance with applicable licensing requirements including any approval from local or state governmental authorities to insure fire and health requirements are being met. They determine if a complete application for license has been submitted, provided all required background information, have staff meeting requirements with required background information and required health and safety trainings. When all these are met, permission to operate may be granted. All licensed CCDF providers must meet these standards.

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care center providers.

Child Care Services (CCS) licensing staff makes a minimum of three unannounced monitoring visits to program operating a full-year, two unannounced monitoring visits to program operating less than a full year.

iii. Identify the frequency of unannounced inspections:

- A. Once a year
- B. More than once a year

Describe:

A minimum of three unannounced visits are conducted annually.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that child care center providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

Child Care Services (CCS) licensing staff makes a minimum of three unannounced comprehensive monitoring visits to facilities that operate a full-year program and two unannounced monitoring visits annually to facilities that operate less than a full year. CCDF providers are monitored to verify programs meet applicable licensing standards, including health, safety and fire standards. Additional visits are made when programs have numerous, serious, and repeated non-compliances or if a complaint alleging a violation of child care licensing requirements is received. The additional visits are utilized to assist programs in establishing patterns of compliance or to investigate complaints.

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

OAC 340-3-1-6; OAC 340:110-3-1-8; OAC 340:110-3-1-9.2; OAC 340:110-3-1-9.3.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety,

and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

b. Licensed CCDF family child care home

i. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF family child care providers.

Inquiry regarding licensing of a child care program is referred to the licensing specialist in the area where the potential program is located. Once received, licensing provides the inquirer with copies of applicable licensing requirements and refers to other agencies involved in the process such as fire and health department, local city offices. The program is informed by licensing staff that they may not care for children prior to permission to operate being given from Child Care Services. When the inquirer indicates an interest to pursue a license to care for children, licensing staff: determines the necessity for a license according to Oklahoma Statutes, reviews the licensing requirements with the inquirer to determine if other requirements can be met, ascertain qualifications of the inquirer to operate a facility, and provides consultation to assist in developing a program which provides quality care. Monitoring visits are completed to the facility to determine compliance with applicable licensing requirements including any approval from local or state governmental authorities to insure fire and health requirements are being met. They determine if a complete application for license has been submitted, provided all required background information, have staff meeting requirements with required background information and required health and safety trainings. When all these are met, permission to operate may be granted. All licensed CCDF providers must meet these standards.

iii. Identify the frequency of unannounced inspections:

- A. Once a year
- B. More than once a year

Describe:

Child Care Services (CCS) licensing staff makes a minimum of three unannounced monitoring visits to program operating a full-year, two unannounced monitoring visits to programs operating less than a full year.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that family child care providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

Child Care Services (CCS) licensing staff makes a minimum of three unannounced comprehensive monitoring visits to facilities that operate a full-year program and two unannounced monitoring visits annually to facilities that operate less than a full year. CCDF providers are monitored to verify programs meet applicable licensing standards, including health, safety and fire standards. Additional visits are made when programs have numerous, serious, and repeated non-compliances or if a complaint alleging a violation of child care licensing requirements is received. The additional visits are utilized to assist programs in establishing patterns of compliance or to investigate complaints.

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

OAC 340-3-1-6; OAC 340:110-3-1-8; OAC 340:110-3-1-9.2; OAC 340:110-3-1-9.3.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time

(658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

c) Licensed in-home CCDF child care

i. Does your state/territory license in-home child care (care in the child's own home)?

No (Skip to 5.4.3 (a)).

Yes. If yes, answer A-D below:

A. Describe your state/territory's policies and practices for pre-licensure inspections of licensed in-home care (care in the child's own) providers for compliance with health, safety, and fire standards.

B. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care in-home care (care in the child's own home) providers.

C. Identify the frequency of unannounced inspections:

1. Once a year

2. More than once a year

Describe:

D. If applicable, describe the differential monitoring process and how these inspections ensure that in-home care (care in the child's own providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

E. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF in-home care (care in the child's own home) providers.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

NA

5.4.3 Inspections for license-exempt center-based and family child care providers.

The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Inspections for relative providers will be addressed in question 5.6.4. At a minimum, the health and safety requirements to be inspected must address the standards listed in subsection 5.3 (98.41(a)).

To certify, describe the policies and practices for the annual monitoring of:

a. License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

All license-exempt programs receiving CCDF are military and tribal child care programs located on federal property. Monitoring is completed by Department of Defense or Tribal Organizations. Lead agency monitors compliance with QRIS annually during announced visit including a review of military or tribal monitoring.

i. Provide the citation(s) for this policy or procedure

OAC340:110-1-5; OAC 340:110-1-8.4.

b. License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

All license-exempt programs receiving CCDF are military and tribal child care programs located on federal property. Monitoring is completed by Department of Defense or Tribal Organizations. Lead agency monitors compliance with QRIS annually during announced visit including a review of military or tribal monitoring.

i. Provide the citation(s) for this policy or procedure

OAC340:110-1-5; OAC 340:110-1-8.4.

5.4.4 Inspections for license-exempt in-home care (care in the child's own home).

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. A child's home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted on-site inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission prior to entering the home for inspection (98.42(b)(2)(iv)(B)).

a. To certify, describe the policies and practices for the annual monitoring of license-exempt in-home care, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used.

In-home care providers must be related to the children and are not required to be licensed by state statutes and are not monitored by the Lead Agency.

b. Provide the citation(s) for this policy or procedure.

OAC 340:40-13-2.

c. List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers:

In-home providers are not monitored. For license-exempt CCDF programs, monitoring is completed by the Department of Defense or Tribal Organizations. The Lead Agency monitors compliance with QRIS annually during announced visit including a review of military or tribal monitoring.

5.4.5 Licensing Inspectors (or qualified inspectors designated by the Lead Agency).

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the states licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a. To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers

Individuals hired to monitor child care facilities are classified as child care licensing specialists. These individuals must meet the following minimum qualifications: Education and experience requirements at this level consist of a master's degree in early childhood education, child development or social work; or a bachelor's degree in early childhood education, child development or social work and one year of professional level

experience in child care licensing, early childhood education or social work; or a bachelor's degree and two years of professional experience in child care licensing, early childhood education, social work, or in a licensed child care or formal early childhood setting.

b. To certify, describe how inspectors and monitors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

Licensing staff onboarding training topics include history and philosophy of Oklahoma licensing, overview and enforcement of child care center-based care, Community Hope Centers, and family child care home requirements, QRIS, complaint investigation, including interviewing skills, documentation, policy, balance of regulation, licensing ethics, and provider and program resources. Onboarding training also includes hands-on and witnessed observation to verify consistent monitoring and enforcement. The onboarding processes and procedures ensure consistent training regarding monitoring and enforcement of requirements. Licensing staff are required to complete a minimum of 40 hours of job-related training annually. Supervisory staff are required to complete 40 hours of job-related training annually, which includes 20 hours of supervisory and management training. Annual training includes mandatory agency training and licensing-specific training addressing cultural diversity, professionalism, health and safety, topics impacting families and young children, and revisions and enforcement of policy and licensing requirements.

c. Provide the citation(s) for this policy or procedure.

OAC 340:110-1-20

5.4.6 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a. To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

The Lead Agency standard practice is the equal distribution of providers and programs among licensing staff throughout the state to comply with the state practice of a minimum of three unannounced monitoring visits annually. As of February 2021, the number of licensing caseloads is 91 with 3,004 programs to monitor. The average caseload is 33 cases per licensing specialist. As numbers of programs increase or decrease in specific areas of the state, the caseloads are altered to maintain relatively equal distribution. Caseload assignments take into account area, number of programs and distance between duty station and programs.

b. Provide the policy citation and state/territory ratio of licensing inspectors.

This ratio is not cited in policy.

5.5 Comprehensive Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For family child care homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)). Exemptions for relative providers will be addressed in 5.6.5.

A comprehensive background check must include eight (8) separate and specific components (98.43(2)(b)), which encompass three (3) in-state checks, two (2) national checks, and three (3) interstate checks (if the individual resided in another state in the preceding 5 years).

5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

a. Components of In-State Background Checks

i. Criminal registry or repository using fingerprints in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

ii. Sex offender registry or repository check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

iii. Child abuse and neglect registry and database check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

b. Components of National Background Check

i. FBI Fingerprint Check

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

ii. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

c. Components of Interstate Background Checks

i. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional.

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

ii. Sex offender registry or repository in any other state where the individual has resided in the past 5 years.

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) to mitigate any gaps that may exist between the two sources.

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

iii. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years

Note: This is a name-based search

Licensed, regulated, or registered child care providers

Citation:

OAC 340:2-46-5

All other providers eligible to deliver CCDF Services

Citation:

5.5.2 Procedures for a Provider to Request a Background Check.

Child care providers are required to submit requests for background checks for each of their staff members to the appropriate state or territorial agency, which is to be defined clearly on the state or territory Web site. Family child care home providers must also submit background check requests for all household members over the age of 18. The requests must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years per § 98.43(d)(1) and (2). The state or territory must ensure that its policies and procedures under this section, including the process by which a child care provider or other state or territory may submit a background check request, are published on the web site of the state or territory as described in § 98.43(g) and the web site of local lead agencies.

a. Describe the state/territory procedure(s) for a provider to request the required background checks. If the process is different based on provider type, please include that in this description. If the process is different based on each background check component, please include that in this description.

The criminal background check process includes fingerprint submissions and a Background Check Request for each individual requiring a comprehensive national criminal history check. The program submits a Background Check Request either

electronically or on a paper form to OBI. The individual registers and is fingerprinted through the fingerprint livescan vendor where the results of the fingerprints are returned directly to Department of Human Services (DHS) Office of Background Investigations (OBI).

b. The state/territory must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. What are the fees and how do you ensure that these fees do not exceed the actual cost of processing and administering the background checks? Lead Agencies can report that no fees are charged if applicable (98.43(f)).

The individual or program is responsible for the \$52.25 fee associated with the fingerprinting. This fee is paid to the fingerprint livescan vendor. Should an out-of-state name based criminal background check and Child Abuse and Neglect Registry search be required, the individual or program would be responsible for the fee charged by the agency conducting the searches. DHS does not have a processing fee for background checks.

c. Describe the state/territory policy(ies) related to prospective staff members working on a provisional basis. Pending completion of all background check components in 98.43(b), the prospective staff member must be supervised at all times by an individual who received a qualifying result on a background check described in 98.43(b) within the past 5 years (98.43(c)(4)) and the prospective staff member must have completed and received satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the prospective staff member resides. Describe and include a citation for the Lead Agency's policy:

Provisional results are disseminated when a complete request from the program was received but the OSBI or national criminal history records were not received. OAC 340:2-46-5. Individuals that have been awaiting results of national criminal history records search, based upon fingerprint submission may be hired. However, until complete results are received, the individual does not have unsupervised access to children. OAC 340:110-3-282. In addition, provisional results are disseminated when a complete request form, OSBI and national criminal history records have been received however, the individual has lived out of state during the previous 5 years but the criminal history and/or the child abuse and neglect has not been received from that state.

d. Describe the procedure for providers to request background checks for staff members that resided in another state within the previous 5 years.

The criminal background check process includes fingerprint submissions and a Background Check Request for each individual requiring a complete criminal history check. If the individual has lived in another state within the previous 5 years, a name based criminal history check is required from each state, if the state is not a participating NFF state. In addition, a Child Abuse and Neglect registry search is required from each state the individual has lived in within the previous 5 years. The program submits a Background Check Request either electronically or on a paper form to OBI. The individual registers and is fingerprinted through the fingerprint livescan vendor where the results of the fingerprints are returned directly to Department of Human Services (DHS) Office of Background Investigations (OBI).

e. Describe the procedure to ensure each staff member completes all components of the background check process at least once during each 5-year period. If your state enrolls child care staff members in the FBI Rap Back Program or a state-based rap back program, please include that in this description. Note: An FBI Rap Back program only covers the FBI Fingerprint component of the background check. If child care staff members are enrolled in a state-based rap back, please indicate which background check components are covered by this service.

Background investigations are required for owners and responsible entities, prior to authorization to operate, personnel applicants, prior to hire, individuals with unsupervised access to children, prior to having access to children and adults living in the facility, prior to authorization to operate or moving into the facility of an existing program. Programs must request a criminal history review for required individuals every 5 years per Child Care Services Licensing requirements. OAC 340:110-3-282. All individuals are enrolled in the state-based rap back upon submission of fingerprints. The Oklahoma State Bureau of Investigation is currently in the process of being approved for FBI RAP back. Once completed all applicants submitting fingerprints will be automatically enrolled in the FBI RAP back program.

f. Describe the procedure to ensure providers who are separated from employment for more than 180 consecutive days receive a full background check.

Regardless of the length of time of separation, background investigations are required for

owners and responsible entities, prior to authorization to operate, personnel applicants, prior to hire, individuals with unsupervised access to children, prior to having access to children and adults living in the facility, prior to authorization to operate or moving into the facility of an existing program. OAC 340:110-3-282.

g. Provide the website link that contains instructions on how child care providers should initiate background check requests for a prospective employee (98.43(g)).

<https://oklahoma.gov/okdhs/services/obi.html>

5.5.3 Procedures for a Lead Agency to Respond to and Complete a Background Check.

Once a request has been initiated, the state shall carry out the request of a child care provider for a criminal background check as expeditiously as possible, but not to exceed 45 days after the date on which such request was submitted. The Lead Agency shall make the determination whether the prospective staff member is eligible for employment in a child care program (98.43(e)(1)). Lead Agencies must ensure the privacy of background checks by providing the results of the criminal background check to the requestor or identified recipient in a statement that indicates whether a child care staff member (including a prospective child care staff member or a family child care household member over the age of 18) is eligible or ineligible for employment, without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual. In the following questions, describe the Lead Agency's procedures for conducting background checks. These responses should include:

- The name of the agency that conducts the investigation; include multiple names if multiple agencies are involved in different background check components
- How the Lead Agency is informed of the results of each background check component
- Who makes the determinations regarding the staff member's eligibility? Note: Disqualification decisions should align to the response provided in 5.5.7.
- How the Lead Agency ensures that a background check request is carried out as quickly as possible and not more than 45 days after a request is submitted.

a. Describe the procedures for conducting In-State Background Check requests and making a determination of eligibility.

A complete background check review request includes, submission of fingerprints and out-of-state criminal history and child abuse and neglect records, when applicable. OBI reviews criminal history records received and conducts a search of Restricted Registry, Community Service Worker Registry, Nontechnical Services Worker Abuse Registry, Oklahoma State Courts Network, On Demand Court Records, Oklahoma Department of Corrections (DOC), DOC sex offender registry, DOC violent offender registry, national sex offender registry and NCIC sex offender registry. Individuals are restricted and/or prohibited from child care when the individual pleads guilty or nolo contendere or a conviction of a crime outlined in Child Care Licensing Requirements. OBI makes the final determination of eligibility.

b. If the procedure is different for National Background checks, including the name-based NCIC NSOR check and FBI fingerprint check, please describe here.

Child care applicants must use the livescan vendor, Idemia to submit electronic fingerprints. Idemia sends the results to OSBI for processing. OSBI processes the Oklahoma criminal history and sends the fingerprints to the FBI for processing. The FBI returns the results to OSBI. OSBI then sends the final results of both the Oklahoma and national fingerprints to OBI. OBI reviews the state and national criminal history check and conducts the NCIC NSOR search to determine eligibility.

c. Describe the procedures for conducting Interstate Background Check requests and making a determination of eligibility. (Note this response should detail how a state conducts an interstate check for a provider who currently lives in their state or territory but has lived in another state(s) within the previous five years).

When an individual has lived in another state other than Oklahoma within the previous 5 years, OBI assists the individual in obtaining the name based criminal history, when the state is not a participating NFF state, and the child abuse and neglect history. The program or individual is responsible for the cost of the out-of-state background checks. Some states require the documents to be sent directly to OBI and others require them to be sent to the individual or program. When results are sent to the individual or the program, the results must be provided to OBI when it is not a violation of state statutes of the previous state. OBI reviews the criminal history and child abuse and neglect records for disqualifying offenses or findings and makes a determination of eligibility.

d. Describe the procedure the Lead Agency has in place to make an eligibility determination in the event not all the components of the background check are completed within the required 45-day timeframe.

Provisional results are disseminated when a request from the program was received but the OSBI or national criminal history records or the out-of-state criminal history or child abuse and neglect records were not received. OAC 340:2-46-5. OBI reviews criminal history records received and conducts a search of Restricted Registry, Community Service Worker Registry, Nontechnical Services Worker Abuse Registry, Oklahoma State Courts Network, On Demand Court Records, Oklahoma Department of Corrections (DOC), DOC sex offender registry, DOC violent offender registry, national sex offender registry and NCIC sex offender registry. Individuals are restricted and/or prohibited from child care when the individual pleads guilty or nolo contendere or a conviction of a crime outlined in applicable Child Care Licensing Requirements. OBI makes the final determination of eligibility. Policy requires background check investigations to be processed within 5 business days. OAC 340:2-46-5.

e. Describe procedures for conducting a check when the state of residence is different than the state in which the staff member works.

A complete background check review request includes, submission of fingerprints, out-of-state name based criminal history, when applicable, and child abuse and neglect records. OBI reviews criminal history records received and conducts a search of Restricted Registry, Community Service Worker Registry, Nontechnical Services Worker Abuse Registry, Oklahoma State Courts Network, On Demand Court Records, Oklahoma Department of Corrections (DOC), DOC sex offender registry, DOC violent offender registry, national sex offender registry and NCIC sex offender registry. Individuals are restricted and/or prohibited from child care when the individual pleads guilty or nolo contendere or a conviction of a crime outlined in Child Care Licensing Requirements. OBI makes the final determination of eligibility.

5.5.4 State designation as a "Compact State" and participation in the National Fingerprint File program.

a. "Compact States" are states that have ratified the National Crime Prevention and Privacy Compact Act of 1998 in order to facilitate electronic information sharing for noncriminal justice purposes (such as employment) among the Federal Government and states. More information can be found here: <https://www.fbi.gov/services/cjis/compact-council>. The Compact allows signatory states to disseminate its criminal history record information to other states for noncriminal justice purposes in accordance with the laws of the receiving state. For the most up-to-date Compact States and Territories map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory a Compact State?

No

Yes

b. The National Fingerprint File (NFF) is a database of fingerprints, or other unique personal identification information relating to an arrested or charged individual, which is maintained by the FBI to provide positive fingerprint identification of record subjects. Only a state or territory that has ratified the Compact (a Compact State) may join the NFF program. An FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history record repository if the responding state (where the child care staff member has resided within the past 5 years) participates in the NFF program. It is unnecessary to conduct both the FBI fingerprint check and the search of an NFF state's criminal history record repository (refer to CCDF-ACF-PIQ-2017-01). For the most up-to-date NFF Participation map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory an NFF State?

No

Yes

5.5.5 Procedures for a Lead Agency to Respond to Interstate Background Checks:

a. Interstate Criminal History Registry Check Procedures

Provide a description of how the state or territory responds to interstate criminal history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain criminal history information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Oklahoma is a NFF state therefore, interstate criminal history checks are not requested.

b. Interstate Sex Offender Registry Check Procedures

Provide a description of how the state or territory responds to interstate sex offender history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain sex offender information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

https://sors.doc.state.ok.us/svor/f?p=119:5:0::NO:RP%2c5:P5_SEARCH_TYPE_PUBLIC:ASIC

c. Interstate Child Abuse and Neglect Registry Check Procedures

Provide a description of how the state or territory responds to interstate child abuse and neglect history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain child abuse and neglect information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

The requesting government or state agency submits a request for interstate child abuse and neglect history check to the childcare.occs@okdhs.org email address. The child care registry is reviewed to determine if the individual is listed as a registrant or non-registrant. The results are returned to the requesting entity on form 07LC032E within 72 hours.

5.5.6 Consumer Education Website Links to Interstate Background Check Processes

Lead Agencies must have requirements, policies, and procedures in place to respond as expeditiously as possible to other States', Territories' and Tribes' requests for background checks in order to meet the 45-day timeframe (98.43(a)(1)(iii)). In addition, Lead Agencies are required to include on their consumer education website the process by which another Lead Agency may submit a background check request, along with all of the other background check policies and procedures (98.43 (g)).

State and Territory Lead Agencies are required to designate one page of their existing Consumer Education Website as a landing page for all interstate background check related

processes and procedures pertaining to their own state. The purpose of having a dedicated interstate background check web page on the Lead Agency Consumer Education Website is to help state and territories implement the interstate background check requirements of the CCDBG Act (CCDF Consumer Education Website and Reports of Serious Injuries and Death (OMB #0970-0473)).

Check to certify that the required elements are included on the Lead Agency's consumer education website for each interstate background check component, and provide the direct URL/website link.

Note: The links provided below should be a part of your consumer education website identified in 2.3.11.

a. Interstate Criminal Background Check:

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email
- v. FAX
- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
- viii. Forms
- ix. Fees
- x. Is the state a National Fingerprint File (NFF) state?
- xi. Is the state a National Crime Prevention and Privacy Compact State?
- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://oklahoma.gov/okdhs/services/obi/ccoutstate.html>

b. Interstate Sex Offender Registry (SOR) Check:

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email
- v. FAX
- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
- viii Forms
- ix. Fees
- Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://oklahoma.gov/okdhs/services/obi/ccoutstate.html>

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

- i. Agency Name
- ii. Is the CAN check conducted through a County Administered Registry or Centralized Registry?
- iii. Address
- iv. Phone Number
- v. Email
- vi. FAX

- vii. Website
- viii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification is needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?))
- ix. Forms
- x. Fees
- xi. Description of information that may be included in a response to a CAN registry check (including substantiated instances of child abuse and neglect accompanied by the State's definition of "substantiated" instances of child abuse and neglect.
- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://oklahoma.gov/okdhs/services/obi/ccoutstate.html>

5.5.7 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry (98.43 (c)(1)(i-iii)). Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option) - a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)(iv-v)).

a. Does the state/territory disqualify child care staff members based on their conviction for any other crimes not specifically listed in 98.43(c)(i)?

- No
- Yes.

If yes, describe other disqualifying crimes and provide the citation:

Individuals are disqualified if they are registered on the Restricted Registry,

Oklahoma Violent Offenders Registry or the Oklahoma Sex Offender Registry. In addition, individuals can be restricted from employment for pleas of guilty, nolo contendere or convictions of offenses outlined in OAC 340:110-3-282.

b. Describe how the Lead Agency notifies the applicant about their eligibility to work in a child care program. This description should detail how the Lead Agency ensures the privacy of background checks. Note: The Lead Agency may not publicly release the results of individual background checks. (98.43(e)(2)(iii)).

c. Describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43 (e)(2-4)).

OKDHS requires individuals to be fingerprinted under the NCPA/VCA federal statute which authorizes a state agency to disseminate national fingerprint results to an authorized qualified entity for the purpose of child care. The qualified entity requests a national background check, OBI will return the notification of eligibility to the requesting qualified entity. When criminal history records are found, OBI returns a copy of the individual's Criminal History Record Information (CHRI) with a dispute resolution form to the individual giving each person the opportunity to dispute the accuracy of the record with both OBI (should OBI make a determination the individual is disqualified based on the record) and the arresting agency.

5.5.8 Appeals Processes for Background Checks

States and territories shall provide for a process by which a child care program staff member (including a prospective child care staff member) may appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report. The state or territory shall ensure that:

-- The child care staff member is provided with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal

-- A child care staff member will receive clear instructions about how to complete the appeals

process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report

-- If the staff member files an appeal, the state or territory will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime

-- The appeals process is completed in a timely manner for any appealing child care staff member

-- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate 1) the state's efforts to verify the accuracy of information challenged by the child care staff member, 2) any additional appeals rights available to the child care staff member, and 3) information on how the individual can correct the federal or state records at issue in the case. (98.43(e)(3))

-- The Lead Agency must work with other agencies that are in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.

a. What is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background check report? If there are different appeal process procedures for each component of the check, please provide that in this description, including information on which state agency is responsible for handling each type of appeal. Note: The FBI Fingerprint Check, State Criminal Fingerprint, and NCIC NSOR checks are usually conducted by a state's Identification Bureau and may have different appeal processes than agencies that conduct the state CAN and state SOR checks.

When criminal history records are found, OBI returns a copy of the individual's Criminal History Record Information (CHRI) with a dispute resolution form to the individual giving each person the opportunity to dispute the accuracy of the record with both OBI (should OBI make a determination the individual is disqualified based on the record) and the arresting agency.

b. If the appeals process is different for interstate checks, what is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background report for interstate checks?

There is no difference. When criminal history records are found, OBI returns a copy of

the individuals Criminal History Record Information (CHRI) with a dispute resolution form to the individual giving each person the opportunity to dispute the accuracy of the record with both OBI (should OBI make a determination the individual is disqualified based on the record) and the arresting agency.

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

There is no appeal process for the Child Abuse Registry check. There is an appeal process for placement on the CCRR. Once you are on, you can't request removal for 5 years/60 months. 340:110-1-10.1

5.6 Exemptions for Relative Providers

States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from certain health and safety requirements. Note: This exception applies if the individual cares only for relative children.

Check and describe where applicable the policies that the Lead Agency has regarding exemptions for eligible relative providers for the following health and safety requirements. The description should include the health and safety requirements relatives are exempt from, if applicable, as well as which of the federally defined relatives the exemption applies to.

5.6.1 Licensing Requirements (as described in Section 5.1)

- a. Relative providers are exempt from all licensing requirements.
- b. Relative providers are exempt from a portion of licensing requirements.

Describe:

- c. Relative providers must fully comply with all licensing requirements.

5.6.2 Health and Safety Standards (as described in Section 5.2 and 5.3)

- a. Relative providers are exempt from all health and safety standard requirements
- b. Relative providers are exempt from a portion of health and safety standard requirements.

Describe:

- c. Relative providers must fully comply with all health and safety standard requirements.

5.6.3 Health and Safety Training (as described in Section 5.3)

- a. Relative providers are exempt from all health and safety training requirements.
- b. Relative providers are exempt from a portion of all health and safety training requirements.

Describe:

- c. Relative providers must fully comply with all health and safety training requirements.

5.6.4 Monitoring and Enforcement (as described in Section 5.4)

- a. Relative providers are exempt from all monitoring and enforcement requirements.
- b. Relative providers are exempt from a portion of monitoring and enforcement requirements.

Describe:

- c. Relative providers must fully comply with all monitoring and enforcement requirements.

5.6.5 Background Checks (as described in Section 5.5)

- a. Relative providers are exempt from all background check requirements.
- b. Relative providers are exempt from a portion of background check requirements. If checked, identify the background check components that relatives must complete:
 - i. Criminal registry or repository using fingerprints in the current state of residency
 - ii. Sex offender registry or repository in the current state of residency
 - iii. Child abuse and neglect registry and database check in the current state of residency
 - iv. FBI fingerprint check
 - v. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name based search.
 - vi. Criminal registry or repository in any other state where the individual has resided in the past five years.
 - vii. Sex offender registry or repository in any other state where the individual has resided in the past five years.
 - viii. Child abuse and neglect registry or data base in any other state where the individual has resided in the past five years.
- c. Relative providers must fully comply with all background check requirements.

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). This section addresses the quality improvement activities implemented by the Lead Agency related to the support of the child care workforce and the development and implementation of early learning and developmental guidelines. It asks Lead Agencies to describe the measurable indicators of

progress used to evaluate state/territory progress in improving the quality of child care services. (98.53 (f)) in either of these two areas.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors in programs that serve children of all ages. This framework should be developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

i. State/territory professional standards and competencies. Describe:

The Lead Agency requires the child care staff in licensed programs meet annual professional development requirements. The Oklahoma Professional Development Approval System, Oklahoma Professional Development Registry managed through contracted partner agency, Center for Early Childhood and Professional Development

(CECPD), approves professional development training organizations that provide approved training and professional development meeting Lead Agency requirements to licensed child care program personnel throughout the state. Professional development meeting these requirements are aligned with Oklahoma Core Competencies for Early Childhood Practitioners and Oklahoma Competencies for School Time Program Practitioners.

ii. Career pathways. Describe:

The Oklahoma Professional Development Ladder (OPDL) is in place to assist caregivers in their career progression while working in child care and out of school care within the state. The brochure "Career Options and Resources in Early Care and Education", is available to all individuals working or making a determination to work within the field, outlines career opportunities available throughout the industry.

iii. Advisory structure. Describe:

The Lead Agency works with the Oklahoma Partnership for School Readiness (OPSR) in an advisory capacity. Lead Agency staff participate in numerous workgroups within OPSR which also reflects participation from other partner organizations and community stake holders.

iv. Articulation. Describe:

Articulation agreements between the Lead Agency, Career Technology Centers and community colleges throughout the state allow for child care practitioners to achieve national credentials through these avenues upon course and criteria completion and receive college credit hours toward Associate or Bachelor degree programs.

v. Workforce information. Describe:

The Oklahoma Professional Development Registry (OPDR) collects workforce data which includes: work history, educational level, professional development, and compensation information provided by the individual for participation in Oklahoma Child Care Wage Supplement program. Child Care Center Program Directors are required to have an Oklahoma Directors Credential, register the program as a direct care organization and maintain information on the OPDR and ensure personnel and volunteers comply with professional development requirements. Teaching personnel are

required to obtain and maintain a current Oklahoma Professional Development Ladder (OPDL). Primary Caregivers and assistants in Family Child Care Home programs that participate in QRIS are required to be members of the OPDR and have a current OPDL.

vi. Financing. Describe:

Ongoing professional development is supported by the Lead Agency through low and no cost professional development opportunities. Professional development stipends are offered for child care staff who achieve specific professional development achievements and training. The Lead Agency contracts with the Oklahoma State Regents for Higher Education to implement a scholarship program for individuals to receive education at Career Technology Centers statewide, and formal educational hours through community and four year colleges. Students achieve certificates, credentials and degrees in early childhood education with assistance through the Scholars for Excellence in Child Care program.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- i. Continuing education unit trainings and credit-bearing professional development to the extent practicable**

Describe:

Continuing Education Units are available for trainings provided by the Center for Early Childhood Professional Development. Scholars for Excellence in Child Care provide scholarships to achieve credentials and degrees in Child Development.

- ii. Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework**

Describe:

Credit bearing courses and approved professional development align with the Oklahoma Core Competencies. These professional development opportunities meet ongoing professional development requirements for licensed child care programs.

- iii. Other**

Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The Early Education Professional Development Council has been divided into content specific workgroups which each include professional development options and processes. Examples of the individual workgroups are: State Advisory Team; Children’s State Advisory Workgroup; Education, Employment and Training: a workgroup of Governor’s Interagency Council on Homelessness; Child Care / Head Start Partnership; Oklahoma Partnership on School Readiness; Child Abuse Prevention; Trauma Informed Task Force; Early Childhood and Infant Mental Health Workgroup; Oklahoma Institute of Child Advocacy subcommittees; CCR&R Regional Partner meetings; IDEA Panel & Workgroups; Child Care Advisory Committee and Subcommittees; Hope Workgroup; Center for Early Childhood Professional Development Advisory; Sooner Success Advisory Committee; and Autism Advisory Committee.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

The framework supported by the Lead Agency works to provide all individuals working in child care in Oklahoma with a strong foundation to support children in care. Caregivers, teachers and directors are provided opportunities for education and training from basic health and safety requirements to obtaining college degrees while working within the field. This is achieved by supporting the industry through workforce improvement of quality skills and practices to reduce the turnover of caregivers within the state. The Lead Agency Child Care Services recognizes the Career Technology Certificate of Achievement as qualifications for child care personnel. This offers high school aged students within the state an opportunity to obtain education and training that supports caring and educating children as a career choice and are ready to enter the field as qualified employees upon completion.

Individuals are supported through Career Technology Centers in receiving additional training and education to obtain national credentials as a way to progress in their career of caring for children. Scholarships are awarded for those employed in child care to obtain college credit hours from local community colleges in early childhood education and child development as a pathway to obtaining credentials and degrees to further support their career choice of working with Oklahoma's children. Additional educational opportunities are available for these same caregivers to complete a Bachelor Degree program supported by Oklahoma universities throughout the state. Students working through these programs are all provided support in their coursework and educational processes through programs supported by the Lead Agency. Financial awards may be earned by successfully completing these programs. For further educational opportunities that enhance quality care, individuals may receive professional development stipends awarded upon completion of training hours in specifically targeted content areas for greater caregiver competency and better care for children. All of these incentives encourage individuals to continue educational growth opportunities, better stability in the child care field, and the Lead Agency recognizes that having a higher qualified staff working in child care enhances the care of all children.

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates into training and professional development opportunities:

-- the knowledge and application of its early learning and developmental guidelines (where applicable);

-- its health and safety standards (as described in section 5);

-- and social-emotional/behavioral and mental health intervention models for young children, which can include positive behavior intervention and support models that reduce the likelihood of suspension and expulsion of children (as described in Section 2 of the Pre-Print) (98.44(b)).

All training opportunities approved for professional development through the Oklahoma Professional Development Registry are tied to Oklahoma Core Competencies for Early Childhood Practitioners, and Child Development Associate (CDA) content. Oklahoma Early Learning Guidelines are embedded in Oklahoma Core Competencies for Early Childhood Practitioners. Learning Guidelines for School-Age Children: Using Early Learning Guidelines and Oklahoma Academic Standards, Oklahoma Early Learning Guidelines for Infants, Toddlers, and Two's, and Oklahoma Early Learning Guidelines for Ages 3 -5 are all available to anyone working in the child care field within the state. These training opportunities work to inform and familiarize caregivers with the content and how to use them as a resource. Additional professional development opportunities include social-emotional behavior intervention, health and safety standards, and learning environments and curriculum. The Oklahoma Professional Development Registry offers a searchable format through the Center for Early Childhood and Professional Development (CECPD) site <https://okregistry.org/v7/trainings/search> that allows caregivers to develop their own individual learning needs. The Child Care Warmline and Consultation services assists programs with working with children that have challenging behaviors. Child guidance and health professionals are available by phone to assist individuals with resources and provide professional development related to these needs. _

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

All training and professional development opportunities offered through the Oklahoma Professional Development Registry searchable database <https://okregistry.org/v7/trainings/search> are available to Tribal organizations, Indian Tribes, public and private school personnel, parents, and any other members of the general public. These groups are all eligible to attend at the same low costs provided to licensed child care programs within the state. Tribal partners may also access services offered by The Child Care Warmline. Tribal partners are an approved training sponsored organization and provide training opportunities throughout the state. Tribal organizations participate as a full partner with the Lead Agency by participating in work groups and task forces supporting the industry and Child Care Services.

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers in the subsidy system:

a) with limited English proficiency

The Lead Agency Child Care Services (CCS) contracts with the Child Care Resource and Referral (CCR & R) for Hispanic outreach services. These services focus on providers who have limited English proficiency. Information in Spanish is available to distribute to individuals having interest and questions regarding the licensing process. Within this flyer, information includes contact for CCRR and CCS. A bilingual specialist and statewide coordinator with the CCRR distribute these at events targeting the Hispanic communities. Spanish translation is available for professional development requirements to allow the caregivers to enter into the field and obtain professional development. The CCRR supports Spanish speaking caregivers by offering an annual Hispanic Conference with targeted training to this group. Several publications and links to resources translated into Spanish are

available on the Lead Agency CCS webpage.

b) who have disabilities

The Lead Agency website is 508 compliant. Licensing requirements are inclusive of all abilities when qualifications are met. Sign language interpreter services are available.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians as defined in Section 4 of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians (98.44(b)(2)(iv)).

The Oklahoma Professional Development Registry allows for caregivers at multiple educational qualifications and professional levels to enter into the field at many levels. The Professional Development Ladder and Oklahoma Director's Credential allow for increasing levels based on education and professional development achievements. Licensing requirements are inclusive of care for children of all ages, abilities and cultural backgrounds. Ongoing professional development opportunities include training and education on working with children of all ages (infant/toddler, pre-school, school age children), children with varying abilities, engaging children and families across racial and cultural divides, cultural and linguistic abilities, children experiencing homelessness, trauma responsive care of children and challenging behaviors among many others. The Center for Early Childhood and Professional Development has a statewide training calendar with a searchable index for professional development. <https://okregistry.org/v7/trainings/search> Online training is available that includes many of these topics available on demand. <https://cecpdonline.org/>

6.2.5 The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a. Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

Homelessness and Young Children: Education and Services, Homelessness and Young Children: Dealing with Trauma, Homelessness and Young Children: The Role of the Early Childhood Educator, and Understanding Homelessness, are training opportunities provided by the Center for Early Childhood and Professional Development (CECPD) and are available for all caregivers and educators within the state through professional development registry site. <https://okregistry.org/v7/trainings/search> The Lead Agency offers training based on the book Bridges out of Poverty which includes information on families that experience homelessness and is made available to child care providers. Technical assistance through the Child Care Resource and Referral is available to providers dealing with children and homelessness.

b. Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.3.6).

The Lead Agency has staff that work in community outreach programs to assist families seeking services including needs for food and shelter due to being homeless. The Lead Agency was instrumental in leading the effort to begin a new licensed program type Hope Centers that has agency staff housed within the program assisting families with critical needs including food and shelter and offering professional resources for these families as well. Information through publications is available for licensing staff to use during consultation and technical assistance. The Child Care Resource and Referral technical assistance specialists are available to consult with programs who may have families experiencing homelessness. The Lead Agency offers Bridges out of Poverty training to all staff as well.

6.2.6 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

a. Describe the strategies that the state/territory is developing and implementing for strengthening child care providers business practices.

The Lead Agency, through the Center for Early Childhood and Professional Development, offers multiple leadership academies for program directors and family child care home owners to participate in. These Leadership Academies provide quality professional development in all areas of running a successful business in child care. Participants in the Child Care Center Leadership Academy are provided a pre and post Program Administrator Scale Assessment. Family Child Care Home participants receive a pre and posttest in Business Administration Scale Assessment. Through the Oklahoma State Regents for Higher Education, Scholars for Excellence in Child Care program a Director's Certificate of Completions may be awarded when an individual completes targeted formal college credit hours on directing a child care program. Professional development targeting center program directors and family child care home primary caregivers in establishing and understanding business practices are available through the searchable Oklahoma Professional Development Registry.

<https://okregistry.org/v7/trainings/search> These opportunities include a multitude of topics including sound business strategy, business in ECE settings, business marketing, and business plan creation for family child care homes. The Lead Agency Child Care Services is investing in a sequential learning program available online specifically targeting family home providers. The Oklahoma Child Care Resource and Referral offers professional development opportunities as well and will conduct onsite technical assistance on the topic when requested.

b. Check the topics addressed in the state/territory's strategies for strengthening child care providers business practices. Check all that apply.

i. Fiscal management

- ii. Budgeting
- iii. Recordkeeping
- iv. Hiring, developing, and retaining qualified staff
- v. Risk management
- vi. Community relationships
- vii. Marketing and public relations
- viii. Parent-provider communications, including who delivers the training, education, and/or technical assistance
- ix. Other

Describe:

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

Lead Agencies can invest CCDF quality funds in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 of the CCDF Rule, and those included in the activities to improve the quality of child care also addressed in Section 7 (98.53(a)(1)).

6.3.1 Training and professional development of the child care workforce.

a. In the table below, describe which content is included in training and professional development activities and how an entity is funded to address this topic. Then identify which types of providers are included in these activities. Check all that apply.

i. Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies (98.53 (a)(1)(i)(A)).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved

through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ii. Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and the mental health of young children and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.4.5.) (98.53(a)(1)(iii)).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iii. Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. (98.53(a)(1)(iv)).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iv. Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula, and designing learning environments that are aligned with state/territory early learning and developmental standards (98.15 (a)(9)).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

v. Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development.

Describe the content and funding:

CCDF funds are used exclusively. Oklahoma Child Care Resource and Referral offers onsite technical assistance to child care programs and CCDF funds are used exclusively. Oklahoma Child Care Resource and Referral offers onsite technical assistance to child care programs and caregivers so they will be able to provide better care and services to children they care for and their families. The Warmline

contract with the Oklahoma State Department of Education offers a mental health consultation to providers working with children who may be experiencing more challenging behaviors. The Lead Agency has coaches that will work with programs on the Pyramid model of social and emotional supports that will include onsite assistance.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vi. Using data to guide program evaluation to ensure continuous improvement 98.53(a)(1)(ii).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based

- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vii. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

viii. Caring for and supporting the development of children with disabilities and developmental delays 98.53 (a)(1)(i)(B).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead

Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ix. Supporting the positive development of school-age children (98.53(a)(1)(iii)).

Describe the content and funding:

CCDF funds are used exclusively. All professional development within the state is approved through the Center for Early Childhood and Professional Development (CECPD) which ensures that each training meets the criteria set by the Lead Agency. Professional development trainers within the state must all be approved through the CECPD. Prior to this approval, each sponsor must receive training and guidance on becoming an approved trainer. This training includes strategies on being a successful trainer, adult learning and that all trainings must meet the CECPD guidelines and set by the Lead Agency. All approved formal professional development training within the state must include components of the Oklahoma Early Learning Guidelines and Core Competencies for Child Care Practitioners to connect all learning to the Lead Agency goals. Objectives for the training determine this is being followed. This content is expressed within those guiding principles.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

x. Other

Describe:

NA

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

b. Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce and then identify which providers are eligible for this activity. Check all that apply.

i. Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling.

- Licensed center-based
- License exempt center-based

- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the childs own home)
- ii. Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities.
 - Licensed center-based
 - License exempt center-based
 - Licensed family child care home
 - License- exempt family child care home
 - In-home care (care in the childs own home)
- iii. Financial awards such as scholarships, grants, loans, or reimbursement for expenses and/or training, from the state/territory to complete post-secondary education.
 - Licensed center-based
 - License exempt center-based
 - Licensed family child care home
 - License- exempt family child care home
 - In-home care (care in the childs own home)
- iv. Other.
 - Licensed center-based
 - License exempt center-based
 - Licensed family child care home
 - License- exempt family child care home
 - In-home care (care in the childs own home)

Describe:

6.3.2 Describe the measurable indicators of progress relevant to subsection 6.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

Upon completion of a degree or credential, a survey is completed that helps to assess how the individual felt obtaining the education affected their job, work they perform, job

satisfaction, and knowledge level in their chosen field. The survey results are provided to the Lead Agency quarterly and are then used in determining educational success. The Scholars for Excellence in Child Care program collects data from the community colleges and technology centers regarding credentials earned. Each semester, a grade report is submitted that includes the participants of the scholarship who complete a credential. The credentials tracked per semester include: PCC- Pathway Competency Certificate (Earned after completing the Pathway coursework and successfully passing the end of instruction exam at a 75% or higher) CoM- Certificate of Mastery (Earned after completing a total of 18 credit hours at the community college) AA/AS in CD- AAS in CD or CD Admin BA/BS Semi-annually the credentials are reported to The Lead Agency on the 2nd and 4th quarter report. Included in that report is any participant(s) who have earned more than one credential. Finally, every quarter the number of National CDA credentials are reported. On average the participants of the Scholars Program achieve per fiscal year: 20 PCC's 130 CoM's 40 AA/AS degrees 10 AAS degrees 5 BA/BS degrees 20-25 CDA Credentials. The Center for Early Childhood Professional Development tracks all professional development that is obtained throughout the state for all registry members. Reports are provided monthly with a completed annual report that tracks professional development hours offered, received, core competency content areas, degree and credentials received. These numbers are all compared to the previous data to determine progress, achievements and any additional needs.

6.4 Early Learning and Developmental Guidelines

6.4.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward

learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a. Describe how the state/territory's early learning and developmental guidelines address the following requirements:

i. Are research-based.

Oklahoma's Early Learning Guidelines (ELG) for Birth through 36 months were revised in 2018. At that time, the staff at National Center on Early Childhood Development, Teaching & Learning reviewed the draft document providing input. The ELG workgroup utilized that information, used current research and Head Start/Early Head Start Framework guidelines to update the Oklahoma ELGs. The revision in 2019 to ELG for Ages Three through Five, reflected the same process and made edits to align with the Oklahoma Academic Standards. References and additional resources used in the revision of the ELGs are included in each publication.

ii. Developmentally appropriate.

The workgroup involved in the revisions to the ELG publications represented various domains of early childhood professionals so that fidelity to the appropriateness of expectations were consistent. The underlying methodology was to ensure appropriateness for all early care and learning settings.

iii. Culturally and linguistically appropriate.

Inclusion of members from numerous agencies and organizations allowed for the widest possible community input and to address inclusion and diversity.

iv. Aligned with kindergarten entry.

The Director of Early Childhood Curriculum and Instruction for the Oklahoma State Department of Education met with the ELG revision workgroup. Appropriateness of content was designed for delivery in child care, preschool, Head Start, pre-K, and other variations of early care and education.

v. Appropriate for all children from birth to kindergarten entry.

ELGs for Birth through 36 months were revised in 2018. The following year, the ELGs

for 3-5 were revised to keep the flow of developmental expectations and content consistent across both age groups. Age-ranges were also included in the writing of the ELGs since all children develop at different times and at individual rates.

[vi. Implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.](#)

Crucial conversations from various agencies and organizations were taken into account in the revision of the ELGs so that representatives from education, Head Start, special education, child care, and other learning platforms each had input on what should be included.

[b. Describe how the required domains are included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.](#)

[i. Cognition, including language arts and mathematics.](#)

ELGs for Birth through 36 months include concept areas under the headings of Approaches to Learning, Communication Skills and Early Literacy (Language Arts) and Mathematics. ELGs for 3-5 includes Approaches to Learning, Language Arts, and Mathematics.

[ii. Social development.](#)

Both ELG publications include Social and Personal Skills. ELGs for Birth to 36 months also includes content in Self and Social Awareness.

[iii. Emotional development.](#)

Emotional Development is included in both ELG publications in Social and Personal Skills. ELGs for 0-36 months also includes content in Self and Social Awareness.

[iv. Physical development.](#)

Physical Development is a content area in ELG birth to 36 months and Health, Safety and Physical Development is a content area in ELG 3-5.

[v. Approaches toward learning.](#)

Both ELG publications begin with content in the area of Approaches to Learning.

vi. Describe how other optional domains are included, if any:

Each ELG publication also includes Creative Skills and Science.

c. Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates.

The first ELG in Oklahoma was developed in 2011. First with ELGs for 3-6 year olds, then the ELGs for 0 to 36 months. The review workgroup met monthly starting in 2016. Revisions were determined by reviewing other state content; changes to the Head Start Framework and revisions made from the development of the Oklahoma Academic Standards, which replaced the original PASS, Priority Academic Skills. Both publications were developed with similar workgroups and timeframes and allow for consistency across the domain and to strengthen the continuum from birth through five years-of-age.

d. If applicable, discuss the state process for the adoption, implementation, and continued improvement of state out-of-school time standards.

Feedback is continually sought and revisions will be made based on comments and suggestions from users. Each ELG publication has a form in the back of the publication to use for submitting feedback. The ELG books are used in early childhood college courses and professional development courses and many suggestions come from those users. Updates are also considered when submitted for review based on changes to either companion documents related to Head Start/Early Head Start Standards or the Oklahoma Academic Standards.

e. Provide the Web link to the state/territory's early learning and developmental guidelines and if available, the school-age guidelines.

<https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/10-23.pdf>

<https://oklahoma.gov/content/dam/ok/en/okdhs/documents/okdhs-publication-library/10-54.pdf>

<https://oklahoma.gov/okdhs/services/child-care-services/publications-forms-research/ccl-publications.html>

6.4.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

Oklahoma's Early Learning Guidelines (ELG) are used by licensing staff, child care providers, state early care and education professors, CDA instructors, development of professional development courses, and in all areas related to curriculum, lesson plans, appropriate learning environments, health and safety, etc. The ELGs are used in developing program standards, supporting programs in quality improvement, increasing quality levels earned, which in turn increases income, financial support, options for resources, stipends, and attainment of quality assurance levels and monitoring of standards. Professional development in ELGs is a requirement for all staff involved in the Reaching for the Stars quality improvement ratings. The ELGs are also shared with the Oklahoma State Department of Education and Head Start, Early Head Start programs.

6.4.3 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measurable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

The Center for Early Childhood Professional Development is responsible for the Lead Agency's professional development registry. Through this, the CECPD tracks all professional development completed within the state by registry members and this data is used as measurable indicators for progress in quality care for children through the ELGs. During this last reporting year, 930 individuals received ELG training from a total of 355 licensed programs with a potential impact on 11,142 children within the state. Each year the Lead State sets professional development achievement goals for licensed programs within the state and these include ELG trainings. These benchmarks set with an increase on 200 hours each year and are consistently met.

7 Support Continuous Quality Improvement

Lead Agencies are required to use a portion of their CCDF program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the CCDF Plan, the ACF 118, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. In the annual expenditure report, the ACF-696, ACF will collect data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a Quality Progress Report, the ACF 218, that will include a description of activities funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce (Addressed

in Section 6)

- Improving on the development or implementation of early learning and developmental guidelines (Addressed in Section 6)
- Developing, implementing, or enhancing a tiered quality rating and improvement system or other systems of quality improvement for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)
- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds, and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations, and all categories of care. It is important that while Lead Agencies have the flexibility to define "high quality" and develop strategies and standards to support their definition, Lead Agencies should consider how that definition and those strategies for different provider types reflect and acknowledge their unique differences and how quality varies in different settings, including family child care and small care settings as well as child care centers.

This section covers the quality activities needs assessment, quality improvement activities, and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

The Lead Agency conducts a customer service survey every two years and a child care quality initiative survey every three years.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. If applicable, include a direct URL/website link for any available evaluation or research related to the findings.

The most recent survey was completed in 2020. The survey identifies program needs for professional development and knowledge of the state QRIS program, understanding of licensing requirements and the extent of use and knowledge of quality initiative programs.

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

- a. Supporting the training and professional development of the child care workforce as discussed in 6.2 (Related Section: 6.3). Check all that apply.
- i CCDF funds
 - ii. State general funds
- Other funds. Describe:
- b. Developing, maintaining, or implementing early learning and developmental guidelines (Related Section: 6.4). Check all that apply.
- i CCDF funds
 - ii. State general funds
- Other funds. Describe:
- c. Developing, implementing, or enhancing a tiered quality rating and improvement system (Related Section: 7.3). Check all that apply.
- i CCDF funds
 - ii. State general funds
- Other funds. Describe:
- d. Improving the supply and quality of child care services for infants and toddlers (Related Section: 7.4). Check all that apply.
- i CCDF funds
 - ii. State general funds
- Other funds. Describe:
- e. Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7 (Related Section: 7.5). Check all that apply.
- i CCDF funds
 - ii. State general funds
- Other funds. Describe:
- f. Facilitating Compliance with State Standards (Related Section: 7.6). Check all that apply.

- i CCDF funds
- ii. State general funds

Other funds. Describe:

- g. Evaluating and assessing the quality and effectiveness of child care services within the state/territory (Related Section: 7.7). Check all that apply.

- i CCDF funds
- ii. State general funds

Other funds. Describe:

- h. Accreditation Support (Related Section: 7.8). Check all that apply.

- i CCDF funds
- ii. State general funds

Other funds. Describe:

- i. Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development (Related Section: 7.9). Check all that apply.

- i CCDF funds
- ii. State general funds

Other funds. Describe:

- j. Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible (Related Section: 7.10). Check all that apply

- i CCDF funds
- ii. State general funds

Other funds. Describe:

7.3 Quality Rating and Improvement System (QRIS) or Another System of Quality Improvement

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

7.3.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

- a. No, the state/territory has no plans for QRIS development. If no, skip to 7.4.1.
- b. No, but the state/territory is in the QRIS development phase. If no, skip to 7.4.1.
- c. Yes, the state/territory has a QRIS operating statewide or territory-wide.

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners, and provide a link, if available.

<https://oklahoma.gov/okdhs/library/policy/current/oac-340/chapter-110/subchapter-1/parts-1/certification-of-facilities-to-receive-a-differential-quality-rating-and-improvement-level.html>

Oklahoma's QRIS (Reaching for the Stars) is administered statewide by the Lead Agency. It is a four level block rating structure with higher subsidy reimbursement tied

to the higher rated levels. Local Child Care Resource and Referral agencies provide assistance with the application process and with technical assistance for compliance with criteria. Lead Agency employs two QRIS Stars Outreach Specialists to process requests for certification. Licensing staff within the lead agency monitor for compliance with QRIS criteria three times per year.

- d. Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- e. Yes, the state/territory has another system of quality improvement. Describe the other system of quality improvement and provide a link, if available.

7.3.2 Indicate how providers participate in the state or territory's QRIS or another system of quality improvement.

a. Are providers required to participate in the QRIS or another system of quality improvement? Check all that apply if response differs for different categories of care.

- Participation is voluntary
- Participation is partially mandatory. For example, participation is mandatory for providers serving children receiving a subsidy, participation is mandatory for all licensed providers or participation is mandatory for programs serving children birth to age 5 receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

To be eligible for a subsidy contract, child care programs must be issued a permit or license and participate in QRIS. Child care centers must be a One-Star Plus or higher level. Family child care homes must be a One-Star Plus or higher level if on a permit or One-Star level or higher if on a license. Subsidy reimbursement rates are based on Star level. The higher the Star status, the higher the reimbursement rate paid to the provider.

Participation is required for all providers.

b. Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS or another system of quality improvement? Check all that apply.

- i. Licensed child care centers
- ii. Licensed family child care homes
- iii. License-exempt providers
- iv. Early Head Start programs
- v. Head Start programs
- vi. State Prekindergarten or preschool programs
- vii. Local district-supported Prekindergarten programs
- viii. Programs serving infants and toddlers
- ix. Programs serving school-age children
- x. Faith-based settings
- xi. Tribally operated programs
- xii. Other

Describe:

Militay

c. Describe how the Lead Agency's QRIS, or other system for improving quality, considers how quality may look different in the different types of provider settings which participate in the QRIS or other system of quality improvement. For instance, does the system of quality improvement consider what quality looks like in a family child care home with mixed-age groups vs. child care centers with separate age groups? Or are standards related to quality environments flexible enough to define quality in home-based environments, as well as child care center environments?

QRIS criteria is flexible for family child care homes and recognize that these environments are less structured and accommodate mixed-age groups. While a child care center setting is expected to arrange space in clearly defined and well-equipped interest areas in each classroom, family child care home environments are expected to offer opportunities to children during the day to access art, block building, book reading, dramatic play, manipulative play, and music and movement. Also, while center based programs are required to provide a family resource area with books, pamphlets, articles on parenting and community resources, family child care homes has this

information available to families, but not required to specify an area of their home to display these resources. Oklahoma's QRIS is administered statewide by the Lead Agency. It is a four-level block rating structure with higher subsidy reimbursement tied to higher rated levels. The standards are consistent for different type of programs with allowances for different settings. There are different level indicators based on level of rating and type of program. Licensing staff within Lead Agency monitor for compliance with the QRIS criteria three times per year.

7.3.3 Identify how the state or territory supports and assesses the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services or another system of quality improvement. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33).

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
 - a. Programs that meet state/territory PreK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between PreK programs and the quality improvement system) .
 - b. Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
 - c. Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).

d. Programs that meet all or part of state/territory school-age quality standards.

e. Other.

Describe:

NA

7.3.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

No

Yes. If yes, check any links between the state/territory's quality standards and licensing requirements

a. Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.

b. Embeds licensing into the QRIS

c. State/territory license is a "rated" license

d. Other.

Describe:

NA

7.3.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS or another system of quality improvement.

No

Yes. If yes, check all that apply

a. If yes, indicate in the table below which categories of care receive this support.

i. One-time grants, awards, or bonuses

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

ii. Ongoing or periodic quality stipends

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

iii. Higher subsidy payments

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

iv. Training or technical assistance related to QRIS

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

v. Coaching/mentoring

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

vi. Scholarships, bonuses, or increased compensation for degrees/certificates

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

vii. Materials and supplies

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

viii. Priority access for other grants or programs

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

ix. Tax credits for providers

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

x. Tax credits for parents

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

xi. Payment of fees (e.g. licensing, accreditation)

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

b. Other:

CDA Assessment.

7.3.6 Describe the measurable indicators of progress relevant to subsection 7.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency monitors individual program QRIS compliance three times per year. Programs may be reduced at any time to a lower Star level if found to be non-compliant with QRIS requirements. QRIS certifications and reduction in Star level are compared to determine changes in QRIS participation. Lead Agency reports on the number of child care personnel that have increased the level of education. This is tracked through the Center for Early Childhood Professional Development, CECPD, and the Scholars for Excellence in Child Care, as different levels of degrees and certifications are earned. A specialized program for Directors of Child Care Programs and Family Child Care Homes related to business management and leadership is offered through CECPD's Leadership Academy. The attendees of Leadership Academy receive pre and post Program Administrator Scales and Business Administrator Scales and are able to compare score improvement. Surveys are conducted with recipients of Certificates of Achievement to determine if areas of concentration impacted programs. Results of monitoring of QRIS compliance could result in a program being reduced to a lower star level if found to be non-compliant with QRIS requirements. QRIS certifications and reduction in Star level can be compared.

7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.

- a. Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low- income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

- b. Establishing or expanding the operation of community-based, neighborhood-based, or provider networks comprised of home-based providers, or small centers focused on expanding the supply of infant and toddler care.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- c. Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

OPDR has a searchable data base of training that included training provided by CECPD, OCCRRA, QRIS and other training organizations with course work meeting ITT Early Learning Guidelines with developmentally appropriate practices for infants and toddlers. The Lead Agency implements a training bundle focused on the programming and care of ITT focused on 30 professional development hours in this targeted area.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- d. Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant/toddler specialists.

Describe:

OCCRRA ITT Specialist focus on quality care for infants and toddlers throughout the state by providing TA and training.

- Licensed center-based

- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.

- e. Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

OCCRRA ITT Specialist will work in collaboration with other specialists in the state including Child Care Warmline, Oklahoma State Department of Health, Oklahoma Infant Mental Health Association, and SoonerStart staff.

- Licensed center-based
- License exempt center-based

- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- f. Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- g. Developing infant and toddler components within the state/territory's child care licensing regulations.

Describe:

Licensing Requirements for Child Care Programs and Family Child Care Home Requirements both include additional requirements for the care of infants and toddlers in a developmentally appropriate environment with additional health & safety requirements.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- h. Developing infant and toddler components within the early learning and developmental guidelines.

Describe:

Infant Toddler and Two's Early Learning Guidelines.

- Licensed center-based
- License exempt center-based
- Licensed family child care home

- License- exempt family child care home
- In-home care (care in the child's own home)

7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.

- i. Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development.

Describe:

Parents have access to the ELGs on the website and other infant and toddler development specific resources on the Lead Agency Consumer Education Website. Oklahoma Child Care Resource and Referral has additional resources.

- Licensed center-based
- License exempt center-based
- Licensed family child care home

- License- exempt family child care home
- In-home care (care in the child's own home)
- j. Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- k. Coordinating with child care health consultants.

Describe:

Lead Agency offers Child Care Health Consultation through a partnership with Oklahoma State Department of Health. The Oklahoma Child Care Warmline employs a Nurse Consultant who is a trained child care health consultant to offer telephone based health consultation to child care programs in Oklahoma. In addition, the Nurse Consultant offers training to child care providers on health and safety practices.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- l. Coordinating with mental health consultants.

Describe:

Lead Agency partners with Oklahoma State Department of Health (OSDH) and Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) to provide a network of Child Care Infant and Early Childhood Mental Health Consultants (IECMHC). Consultation is offered statewide by telephone through the Oklahoma Child Care Warmline provided by a multidisciplinary consultation team at OSDH. Referrals can then be made for on-site consultation to a local IECMHC from

the Warmline. ODMHSAS has invested in 2 state training centers for IECMHC to spearhead training, mentoring and technical assistance to the network of "fee for services" consultants employed by community partners

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- m. Establishing systems to collect real time data on available (vacant) slots in ECE settings, by age of child, quality level, and location of program.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- n. Other.

Describe:

The Lead Agency will measure the technical assistance provided to programs on ITT care. The number of infant and toddler care professional development training hours completed and the Infant Toddler Certificate of Achievement numbers completed.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

7.4.2 Describe the measurable indicators of progress relevant to subsection 7.4 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency will measure the technical assistance provided to programs on ITT care. The number of infant and toddler care professional development training hours completed and the Infant Toddler Certificate of Achievement numbers completed.

7.5 Child Care Resource and Referral

A Lead Agency may expend funds to establish, expand, or maintain a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.5.1 What are the services provided by the local or regional child care and resource and referral agencies?

Child Care Resource & Referral Agencies provide services related to families, providers, and communities. They offer consumer education and referrals to families seeking care for young children. They work with providers through training, technical assistance, assistance with resources, content related to business planning, leadership, health and safety, and numerous other responses to requests for information. The CCR&Rs often work with providers in person at their facility, online by webinars and websites, by email and phone. Response for assistance during the pandemic led CCR&R staff to deliver PPE and cleaning supplies, dropping off learning materials and resources to front porches, and having longer phone conversations were also a result of some social isolation. Hearing a supportive voice became important and might have been the only link between caregivers and other adults. Through community involvement, CCR&R are involved with advocacy, meeting needs of families in their own communities, and local business initiatives.

7.5.2 Describe the measurable indicators of progress relevant to subsection 7.5 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the

state or territory has met these measures.

Through CCR&R technical assistance, self-assessments are utilized to identify areas for improvement and progress in program change and improvement. Assistance is often given to providers in improving their Quality Rating Improvement Level. Changes in Star levels are tracked.

7.6 Facilitating Compliance With State Standards

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

The Lead Agency monitors programs for compliance with minimum state standards three times annually. When necessary, programs are assisted with a plan of correction, return monitoring visits, consultation and TA from licensing staff and referral to other services. Licensing staff provide professional development training to programs to assist with compliance and quality of the program. Professional development opportunities for free and low cost are provided by the Lead Agency. Scholarships are available for providers to receive education to further achieve meeting standards and improving quality care for children.

7.6.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

- No
- Yes. If yes, which types of providers can access this financial assistance?
 - Licensed CCDF providers
 - Licensed non-CCDF providers
 - License-exempt CCDF providers
 - Other

Describe:

7.6.3 Describe the measurable indicators of progress relevant to subsection 7.6 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency uses various methods to improve compliance with state licensing requirements and QRIS program. Programs are monitored for compliance with minimum requirements three times annually as well as three times annually for QRIS criteria. With each non-compliance documented or criteria not met, a plan of correction is established with the program with a follow-up made to verify correction. These methods are measured for effectiveness through improved compliance, reduction in monitoring frequency plan, reduced complaint allegations, increase/reduction in QRIS level, and closure of the program.

7.7 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.7.1 Does the state/territory measure the quality and effectiveness of child care programs and services in both child care centers and family child care homes?

No

Yes.

If yes, describe any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children.

Child care programs complete an annual self-assessment which is reviewed by the licensing specialist who offers technical assistance to work with the programs in goal setting and achievement. Data is collected through professional development achievements to determine progress in moving the field forward to higher quality care.

7.7.2 Describe the measurable indicators of progress relevant to subsection 7.7 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency utilizes a variety of actions to improve compliance with state standards; plans of correction follow up phone calls, letters, and monitoring visits; increased monitoring frequency plan; and referrals to other services. These methods are measured for effectiveness through improved compliance, reduction in monitoring frequency plan, reduced complaint allegations, increase/reduction in QRIS level, and closure of the program.

7.8 Accreditation Support

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

- a. Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Is accreditation available for programs serving infants, toddlers, preschoolers and school-age children?

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

- b. Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- c. Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- d. Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- e. No, but the state/territory is in the in the development phase of supporting accreditation.

- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- f. No, the state/territory has no plans for supporting accreditation.

7.8.2 Describe the measurable indicators of progress relevant to subsection 7.8 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

No accreditation support is provided by the Lead Agency.

7.9 Program Standards

7.9.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for:

a. Infants and toddlers

Programs that meet National Accrediting Agency standards or Early Head Start Performance Standards qualify for QRIS Three Star Reimbursement Rate. Accreditation programs that submit an application and meet criteria are added to the list of Oklahoma Approved Accrediting Agencies.

b. Preschoolers

Programs that meet National Accrediting Agency standards or Head Start Performance Standards qualify for QRIS Three Star Reimbursement Rate. Accreditation programs that submit an application and meet criteria are added to the list of Oklahoma Approved Accrediting Agencies.

c. and/or School-age children.

Programs, including those that serve only school-age children or that serve school-age children in addition to younger children, that meet National Accrediting Agency standards or Head Start Performance Standards qualify for QRIS Three Star Reimbursement Rate. Accreditation programs that submit an application and meet criteria are added to the list

of Oklahoma Approved Accrediting Agencies.

7.9.2 Describe the measurable indicators of progress relevant to subsection 7.9 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency will monitor progress as programs meet increased QRIS criteria as of quality improvement indicators and provide TA to increase level of participation. Increased program participation will be compared and an indicator of progress.

7.10 Other Quality Improvement Activities

7.10.1 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures. Describe:

Scholars for Excellence in Childcare: Oklahoma State Regents for Higher Education (OSRHE) manages the scholarship program that helps students achieve academic success while working in the child care field full-time. OSRHE is responsible for collecting data on student success and reporting this to the Lead Agency quarterly and a cumulative annual report. Students receive certificates and degrees based upon the course of study in early childhood education. On average, 225 individuals achieve credential and degreed success through this program that works to continue moving the field to a higher professional level with greater outcomes for children. Center for Early Childhood and Professional Development (CECPD): CECPD is the partner the Lead Agency contracts with to collect and track professional development achievements within the state and administer educational achievement rewards for registry members. During the last reporting period, 576,398 hours

of professional development was received by providers within the state. Free professional development opportunities have begun being offered with 1,269 individuals receiving this training within the first few months of the program. Oklahoma Certificate of Achievement Professional Development Stipends are offered to registry member who achieve targeted professional development in infant toddler, pre-school, out-of-school time, quality child care and childhood resiliency. These professional development achievements work to move the field forward with targeted areas of care needs within the state with \$781,000 awarded to individuals through this program during the last year. Oklahoma Child Care Wage Supplement Program: The CECPD manages a new program initiated by the Lead Agency. Registry members receive financial bonuses based on registry level and years of experience within the same child care program. This helps stabilize the industry with financial income supports while encouraging continuity of care to children within the same program. Data is being collected on this program. One hundred twenty-three Spanish language events are conducted within the last year. The CECPD provides monthly dashboards and an annual report to the Lead Agency.

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

- a. Verifying and processing billing records to ensure timely payments to providers

Describe:

The Lead Agency uses an electronic benefits transfer (EBT) system statewide. Payment for service is based on the time and attendance information that the parent documents by swiping his or her EBT card through the point of service (POS) machine on a daily basis. Weekly payments are direct deposited into the provider's bank account for attendance two weeks in arrears, which allows the client 10 days to complete or correct swipes.

- b. Fiscal oversight of grants and contracts

Describe:

All providers who receive subsidy payments must have a Child Care Provider Contract with the Lead Agency. The Child Care Subsidy unit with Adult and Family Services division is responsible for monitoring all provider contracts.

- c. Tracking systems to ensure reasonable and allowable costs

Describe:

d. Other

Describe:

8.1.2 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

a. Conduct a risk assessment of policies and procedures

Describe:

Child Care Subsidy program policies are reviewed annually for necessary revisions.

b. Establish checks and balances to ensure program integrity

Describe:

The Child Care Subsidy unit conducts monthly random case audits using a similar method to the Improper Payments process. Local eligibility staff are notified of cases approved in error. Error trends are used for targeted training of eligibility staff.

c. Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

Supervisors at the local level spot check child care subsidy cases for accuracy. New staff have 100% of their cases reviewed.

d. Other

Describe:

8.1.3 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)), including processes to train child care providers and staff of the Lead Agency and other agencies engaged in the administration of CCDF about program requirements and integrity.

a. Check and describe how the state/territory ensures that all providers for children

receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

i. Issue policy change notices.

Describe:

All upcoming policy changes are posted on the Lead Agency's website for public comment. Providers are notified via the Child Care Services list serve of any policy changes that affect them. The Lead Agency also posts policy changes on the online Child Care Subsidy Provider Handbook, a comprehensive tool developed for the child care provider community. Providers are encouraged to access the handbook often when they have questions about the Child Care Subsidy Program.

ii. Issue policy manual.

Describe:

The Oklahoma Administrative Code (OAC) is housed on the Lead Agency's website at www.okdhs.org. By signing the Child Care Provider Contract, providers acknowledge that they are responsible for maintaining all state and federal standards including the Oklahoma Administrative Code (OAC). In addition, the online Child Care Subsidy Provider Handbook is a comprehensive resource for Child Care Subsidy eligibility and provider policies.

iii. Provide orientations.

Describe:

All providers are required to complete the online Orientation to Child Care Subsidy Contracts training prior to being contracted to receive subsidy payments.

iv. Provide training.

Describe:

All providers are required to complete the online Orientation to Child Care Subsidy Contracts training prior to being contracted to receive subsidy payments. Providers may also be required to complete this training if placed on a corrective action plan for program violations.

v. Monitor and assess policy implementation on an ongoing basis.

Describe:

All Child Care Provider Contracts are monitored by the Child Care Subsidy unit. In

addition, the Lead Agency Office of Inspector General (OIG) conducts audits to ensure compliance with program policies. Providers who violate Lead Agency policies may be required to complete additional training.

- vi. Meet regularly regarding the implementation of policies.

Describe:

- vii. Other.

Describe:

b. Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity (98.68 (a)(3)). Check all that apply:

- i. Issue policy change notices.

Describe:

All staff who administer the CCDF program are notified of policy changes via internal agency broadcast messages that contain links to online training resources.

- ii. Train on policy change notices.

Describe:

All staff who administer the CCDF program are trained on policy changes in a variety of formats including online training tools and back-to-basics trainings conducted at the local level.

- iii. Issue policy manuals.

Describe:

The Oklahoma Administrative Code (OAC) which houses all program policies is available online at the Lead Agency's website. In addition, an online policy tool is available for eligibility staff who administer the Child Care Subsidy program.

- iv. Train on policy manual.

Describe:

: New eligibility staff are trained on the policy manual at New Worker Academy.

- v. Monitor and assess policy implementation on an ongoing basis.

Describe:

In addition to the Improper Payments process, the Lead Agency conducts random audits of child care subsidy cases. The results of the audits are used for targeted training of eligibility staff.

- vi. Meet regularly regarding the implementation of policies.

Describe:

Local leadership meet several times a year at statewide meetings to receive updates and training on new policies and procedures. In addition, back-to-basics trainings for eligibility workers are conducted locally to address new policies or error trends.

- vii. Other.

Describe:

8.1.4 Describe the processes in place to regularly evaluate Lead Agency internal control activities (98.68 (a)(4)). Describe:

All CCDF activities are housed in the Lead Agency. Staff from all divisions responsible for CCDF compliance meet regularly to discuss any issues regarding administration of the CCDF program.

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may

not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a. Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent fraud or intentional program violations**. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations.

- i. Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe the activities and the results of these activities:

The eligibility system includes the federally mandated Income and Eligibility Verification System (IEVS). The system integrates eligibility for all programs (SNAP, Child Care Subsidy, Medical Assistance, and TANF) which allows for more accurate data. Exception reports can also be run. The system also interfaces with several agencies including the Social Security Administration, Oklahoma Employment Security Commission, the United States Postal Service and Oklahoma Child Support Services to share data for more accurate eligibility decisions.

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

Eligibility workers are required to run a case scan report which contains pertinent benefit information about the case as a whole and about individual case members prior to each eligibility determination. The report also checks the Data Exchange system which includes data regarding receipt of SSI and Social Security benefits, wage data, new hires, unemployment compensation, addresses, etc. The Office of Inspector General also uses reports of suspicious EBT activity when conducting provider audits. These efforts assist staff in making more accurate eligibility decisions and help identify potential fraud or intentional program violations.

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

Lead Agency staff review attendance and billing records to identify potential fraud and program violations. These reviews may result in cancelation of a child care

provider's subsidy contract or closure of a client assistance case.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

Supervisors at the local level spot check child care subsidy cases for accuracy. New staff have 100% of their cases reviewed. In addition, the Child Care Subsidy unit at the State Office conducts random quality assurance reviews of child care subsidy cases each month similar to the Improper Payments process. These reviews help the Lead Agency identify potential fraud and intentional program violations.

v. Audit provider records.

Describe the activities and the results of these activities:

The Office of Inspector General reviews provider records during the course of an audit. These audits assist the Lead Agency in identifying potential fraud and intentional program violations. Program violations may result in cancellation of the provider's subsidy contract.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff are trained on the Lead Agency's program integrity efforts. Results of audits are used to identify error trends and the development of training material for eligibility staff.

vii. Other

Describe the activities and the results of these activities:

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

The eligibility system includes the federally mandated Income and Eligibility Verification System (IEVS). The system integrates eligibility for all programs (SNAP, Child Care Subsidy, Medical Assistance, and TANF) which allows for more accurate data. Exception reports can also be run. The system also interfaces with several agencies including the Social Security Administration, Oklahoma Employment Security Commission, the United States Postal Service and Oklahoma Child Support Services to share data for more accurate eligibility decisions.

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

Eligibility workers are required to run a case scan report which contains pertinent benefit information about the case as a whole and about individual case members prior to each eligibility determination. The report also checks the Data Exchange system which includes data regarding receipt of SSI and Social Security benefits, wage data, new hires, unemployment compensation, new hire list, addresses, etc. The Office of Inspector General also uses reports of suspicious EBT activity when conducting provider audits. These efforts assist staff in making more accurate eligibility decisions and help identify unintentional program violations.

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

Lead Agency staff review attendance and billing records to identify unintentional program violations. These reviews may result in a corrective action plan or cancelation of a child care provider's subsidy contract.

- iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

Supervisors at the local level spot check child care subsidy cases for accuracy. New staff have 100% of their cases reviewed. In addition, the Child Care Subsidy unit at the State Office conducts random quality assurance reviews of child care subsidy cases each month similar to the Improper Payments process. These reviews help the Lead Agency identify unintentional program violations.

v. Audit provider records.

Describe the activities and the results of these activities:

The Office of Inspector General reviews provider records during the course of a provider audit. These audits assist the Lead Agency in identifying unintentional program violations. Program violations may result in a corrective action plan or cancellation of the provider's subsidy contract.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff are trained on the Lead Agency's program integrity efforts. Results of audits are used to identify error trends and the development of training material for eligibility staff.

vii. Other

Describe the activities and the results of these activities:

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

The eligibility system includes the federally mandated Income and Eligibility Verification System (IEVS). The system integrates eligibility for all programs (SNAP, Child Care Subsidy, Medical Assistance, and TANF) which allows for more accurate data. Exception reports can also be run. The system also interfaces with several agencies including the Social Security Administration, Oklahoma Employment Security Commission, the United States Postal Service and Oklahoma Child Support Services to share data for more accurate eligibility decisions.

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

Eligibility workers are required to run a case scan report which contains pertinent benefit information about the case as a whole and about individual case members prior to each eligibility determination. The report also checks the Data Exchange system which includes data regarding receipt of SSI and Social Security benefits, wage data, new hires, unemployment compensation, new hire list, addresses, etc. These efforts assist staff in making more accurate eligibility decisions and help identify agency errors.

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

Lead Agency staff review attendance and billing records to identify agency errors.

- iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

Supervisors at the local level spot check child care subsidy cases for accuracy. New staff have 100% of their cases reviewed. In addition, the Child Care Subsidy unit at the State Office conducts random quality assurance reviews of child care subsidy cases each month similar to the Improper Payments process. These reviews help the Lead Agency identify agency errors.

v. Audit provider records.

Describe the activities and the results of these activities:

The Office of Inspector General reviews provider records during the course of a provider audit. These audits assist the Lead Agency in identifying agency errors.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff are trained on the Lead Agency's program integrity efforts. Results of audits are used to identify error trends and the development of training material for eligibility staff.

vii. Other

Describe the activities and the results of these activities:

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a. Identify what agency is responsible for pursuing fraud and overpayments (e.g. State Office of the Inspector General, State Attorney).

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8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:

i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency attempts to recover all established overpayments regardless of

amount.

- ii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

Overpayments due to fraud are referred to the courts for prosecution.

- iii. Recover through repayment plans.

Describe the activities and the results of these activities:

Both providers and clients that have an established overpayment can contact the Lead Agency to set up a repayment plan.

- iv. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

Providers can choose to have a percentage of their payments recouped to repay overpayments.

- v. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

- vi. Recover through other means.

Describe the activities and the results of these activities:

- vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

The Office of Inspector General Child Care Audit Unit is responsible for auditing child care providers for appropriate use of CCDF. Audits are based on referrals, random sample, or suspicious EBT activity. Any program violations identified during the course of an audit are forwarded to the Finance and Child Care Subsidy units for further action which may include establishment of overpayments and cancellation of the provider's subsidy contract. When audit results determine fraud has occurred, a referral to the OIG Investigations Unit is made.

viii. Other

Describe the activities and the results of these activities:

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

c. Check and describe any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- i. N/A. the Lead Agency does not recover misspent funds due to unintentional program violations.
- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency attempts to recover all established overpayments regardless of amount.

- iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iv. Recover through repayment plans.

Describe the activities and the results of these activities:

Both providers and clients that have an established overpayment can contact the Lead Agency to set up a repayment plan.

- v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

Providers can choose to have a percentage of their payments recouped to repay overpayments.

- vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

- vii. Recover through other means.

Describe the activities and the results of these activities:

- viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

The Office of Inspector General Child Care Audit Unit is responsible for auditing child care providers for appropriate use of CCDF. Audits are based on referrals, random sample, or suspicious EBT activity. Any program violations identified during the course of an audit are forwarded to the Finance and Child Care Subsidy units for further action which may include establishment of overpayments and cancellation of the provider's subsidy contract.

- ix. Other

Describe the activities and the results of these activities:

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

d. Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- i. N/A. the Lead Agency does not recover misspent funds due to agency errors.
- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency attempts to recover all established overpayments regardless of amount.

- iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iv. Recover through repayment plans.

Describe the activities and the results of these activities:

Both providers and clients that have an established overpayment can contact the Lead Agency to set up a repayment

- v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

Providers can choose to have a percentage of their payments recouped to repay overpayments.

- vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

- vii. Recover through other means.

Describe the activities and the results of these activities:

- viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

The Office of Inspector General Child Care Audit Unit is responsible for auditing child care providers for appropriate use of CCDF. When an agency error is identified during the course of an audit, the Child Care Subsidy Unit is contacted for further action which may include correction or closure of a client assistance case and establishment of an overpayment.

- ix. Other

Describe the activities and the results of these activities:

8.1.7 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

- a. Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe the activities and the results of these activities:

When it is discovered that a client was approved in error, the eligibility worker closes the child care assistance. Whenever a negative action is taken, a computer generated notice is sent to the client describing the reason for the closure and notifying the client of his or her appeal rights. All negative actions allow for an appeal which includes an administrative hearing. In addition, there is no period of disqualification. The client may reapply at any time.

- b. Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe the activities and the results of these activities:

Providers who are found to have violated Lead Agency policies may have their subsidy contract canceled. Following cancelation, providers are sent a notice explaining that they may request a review of the cancellation with the Deputy Director of Programs in Adult and Family Services. There is not a period of disqualification; providers may reapply for a subsidy contract at any time. However, all contracts are granted at the discretion of the Lead Agency.

- c. Prosecute criminally.

Describe the activities and the results of these activities:

The Office of Inspector General refers overpayments due to fraud to the courts for prosecution.

- d. Other.

Describe the activities and the results of these activities:

Appendix A: MRS, Alternative Methodology and Narrow Cost Analysis Waiver Request Form

Lead Agencies may apply for a temporary waiver for the Market Rate Survey or ACF pre-approved alternative methodology and/or the narrow cost analysis in. These waivers will be considered extraordinary circumstance waivers to provide relief from the timeline for completing the MRS or ACF pre-approved alternative methodology and the narrow cost analysis during the COVID-19 pandemic. These waivers are limited to a one-year period.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in Section 4, questions 4.2.1 and 4.2.5.

To submit a Market Rate Survey (MRS) or ACF pre-approved alternative methodology or a Narrow Cost Analysis waiver, complete the form below.

Check and describe each provision for which the Lead Agency is requesting a time-limited waiver extension.