Child Care and Development Fund (CCDF) Plan

for

State/Territory Arizona

FFY 2019–2021

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the Final Rule was released. The Final Rule makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

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

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

Instructions:

CCDF Plan Response Options for Areas Where Implementation Is Still in Progress

As indicated in the Preamble to the CCDF Final Rule (81 FR, p. 67443–4), States must demonstrate compliance with all requirements of the Final Rule no later than October 1, 2018 (the effective date of the FY 2019-2021 CCDF Plan). The only exception is background check requirements, for which States may request time-limited waiver extensions. As such,
this Preprint was developed with the expectation that all requirements, with the exception of background check requirements, would be fully implemented no later than October 1, 2018.

Note that for any changes to the CCDF program effective prior to September 30, 2018, Lead Agencies will be required to submit Plan amendments to the FY 2016-2018 CCDF Plans.

ACF recognizes that Lead Agencies may still be working on implementing some requirements of the Final Rule in order to meet this deadline and may have pending actions (such as legislation or administrative rules) to be implemented at the time of Plan submission. To facilitate responses in these areas, Lead Agencies should use associated “Describe” boxes to provide up-to-date information on the status for these requirements at the time of Plan submission. In the description of the CCDF requirements, ACF requests that the Lead Agency specify what components are implemented (if any) and identify what components are still pending. For pending components, Lead Agencies should list any major pending actions (passage of legislation, approval of administrative rules, etc.) needed to complete implementation and expected completion date. Lead Agencies may update these descriptions prior to Plan approval by the end of September, as appropriate, or submit a Plan Amendment pursuant to the requirements at 98.18(b) after the Plan becomes effective on October 1, 2018.

Please note that all requirements not fully implemented by the Final Rule deadline are subject to compliance actions, such as corrective action plans and/or penalties in accordance with CCDF regulations.

Citations

ACF recognizes that Lead Agencies use different mechanisms to establish policies, such as state statute, regulations, administrative rules, or policy manuals or policy issuances. When asked to provide a citation in the CCDF Plan, Lead Agencies should list the citation(s) for the policy that clearly identifies and establishes the requirement and that allows the Lead Agency to enforce the requirement. Lead Agencies may list multiple sources as needed to cover all types of providers receiving CCDF (e.g., policies for licensed providers may be established in licensing regulations and policies for license-exempt providers may be in subsidy rules).

CCDF Plan Submission

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See http://www.section508.gov/ for more information.)

In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information
reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.
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. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

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)). 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)).

a) Lead Agency or Joint Interagency Office Information:
   - Name of Lead Agency: Arizona Department of Economic Security
   - Street Address: 1789 W. Jefferson Street
   - City: Phoenix
   - State: Arizona
   - ZIP Code: 85007
   - Web Address for Lead Agency: www.des.az.gov

b) Lead Agency or Joint Interagency Official Contact Information:
   - Lead Agency Official First Name: Michael
   - Lead Agency Official Last Name: Trailor
   - Title: Director
   - Phone Number: 602-542-5757
   - Email Address: MTrailor@azdes.gov

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state’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.

CCDF Administrator Contact Information:
  CCDF Administrator First Name: Brook
  CCDF Administrator Last Name: Herrera
  a) Title of the CCDF Administrator: Program Administrator, Child Care Administration
  Phone Number: 602-542-1958
  Email Address: bherrera@azdes.gov
  Address for the CCDF Administrator (if different from the Lead Agency):
    Street Address: 1789 W. Jefferson Street
    City: Phoenix
    State: AZ
    ZIP Code: 85007

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: 
  Address of the CCDF Co-Administrator (if different from the Lead Agency):
    Street Address: 
    City: 
    State: 
    ZIP Code: 

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 it retains overall responsibility for the administration of the program (658D(b)). 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.

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

1. Eligibility rules and policies (e.g., income limits) are set by the:
   ☐ State or territory
   ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
   ☐ Other. Describe:

2. Sliding-fee scale is set by the:
   ☐ State or territory
   ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
   ☐ Other. Describe:

3. Payment rates are set by the:
   ☐ State or territory
   ☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.
   ☐ Other. Describe:

4. Other. List and describe other program rules and policies (e.g., quality rating and improvement systems [QRIS], payment practices):

1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply.

a) Who conducts eligibility determinations?
   ☒ CCDF Lead Agency
   ☐ Temporary Assistance for Needy Families (TANF) agency
   ☐ Other state or territory agency
Local government agencies, such as county welfare or social services departments
☐ Child care resource and referral agencies
☐ Community-based organizations
☐ Other.

b) Who assists parents in locating child care (consumer education)?
☒ CCDF Lead Agency
☐ TANF agency
☐ Other state or territory agency
☐ Local government agencies, such as county welfare or social services departments
☐ Child care resource and referral agencies
☐ Community-based organizations
☐ Other.

c) Who issues payments?
☒ CCDF Lead Agency
☐ TANF agency.
☐ Other state or territory agency.
☐ Local government agencies, such as county welfare or social services departments.
☐ Child care resource and referral agencies.
☐ Community-based organizations.
☐ Other.

1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). 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, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)). N/A

1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, 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 on request to other public agencies, including 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 available to public agencies in other states to the extent practicable and appropriate. The Arizona Department of Economic Security (DES) will make available any code or software developed using CCDF funds to any other State upon request. This includes any and all websites and/or applications used...
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. DES has various policies and procedures in place addressing the security, use, and disclosure of confidential and personally-identifiable information including the follow: DES 1-38-8210 - Security Awareness Training and Education Policy, DES 1-38-8120.10 - Security Awareness and Education Procedures, DES 1-38-8410 - Information Systems Privacy Policy, and DES 1-38-8410.10 - Privacy Procedures.

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)(1)(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 in the development of the CCDF Plan.

Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. The Arizona Department of Economic Security Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. The CCDF Lead Agency meets with the Child Care Advisory Committee quarterly. The Child Care Advisory Committee includes individuals that represent statewide organizations with local affiliations, Tribes, cities, and councils of governments that administer federal early childhood services. Additional representation of this Committee includes, local governments, other federal, state, local, Tribal, and private agencies providing childcare and early childhood development services such as Head Start programs, resource and referral agencies, child welfare advocacy groups, Tribal organizations, family childcare providers, human service advocacy organizations, employer supported childcare programs, Child and Adult Care Food Program sponsors, parents and consumers, before and after school programs, public school childcare programs, business groups, sectarian organizations and
childcare programs, Child Development Associate programs, and organizations that accredit childcare programs. Also participating in this Committee are representatives from State agencies including, the Arizona Early Childhood Development and Health Board (First Things First), the Governor’s Office of Youth, Faith and Family, the Arizona Department of Education (ADE), and the Arizona Department of Health Services (ADHS).

Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body. The Arizona Early Childhood Development and Health Board (First Things First) is the designated as the State Advisory Council. Staff of the State Advisory Council are part of the Child Care Advisory Committee. The CCDF Lead Agency will be making a formal presentation to the First Things First Board on the draft Plan in October 2018. The CCDF Lead Agency offers informal opportunities for the First Things First Board and their Policy and Program Committee to participate in ongoing policy decisions and conversations regarding Plan implementation through First Things First’s participation on the Child Care Advisory Committee. Monthly meetings between FTF and DES that have focused on collaboration and opportunities to leverage each agency’s work. State agency partner meetings that occur monthly with the focus on taking QIRS to scale and reaching high risk and vulnerable populations. Collective meetings between DCS, DES and FTF to focus on increasing the children in child welfare in quality ECE programs. Highlight the work of the Quality First Redesign and partnership with state agencies to demonstrate a focus on increasing the number of programs participating in QF. Use of CCDF funds and funds leveraged from FTF and W. K. Kellogg Foundation in piloting changes to Quality First to support movement towards scale of the Quality Improvement and Rating System in Arizona. Partnership with FTF and the availability of Mental Health Consultation to support programs enrolling children involved with the child welfare system. Overall collaboration with QIRS and FTF QF Scholarships to increase access to low income families’ access to quality early learning.

d) 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. Representatives from the Inter Tribal Council of Arizona Inc. participate in the Child Care Advisory Committee. In addition, DES attends the Inter Tribal Council of Arizona meetings and discusses implementation of the Plan.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF Plan. Representatives from the Arizona Early Childhood Education Association are participating members of the Child Care Advisory Committee, which provides ongoing feedback into the development of the Plan. The Arizona Early Childhood Association represents private, licensed child care centers statewide, promotes affordable, quality early care and education that meets the needs of Arizona’s families and children. Additionally the lead agency participates in the Arizona Early Childhood Alliance ECE Alignment Committee meeting and provides information on the draft plan.

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:
Date of the public hearing. July 26, 2018 and July 31, 2018. Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, 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).

Date of notice of public hearing (date for the notice of public hearing identified in (a)). June 29, 2018. 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).

How was the public notified about the public hearing? Please include specific website links if used to provide notice. It was posted on the DES website/CCA landing page.

Hearing site or method, including how geographic regions of the state or territory were addressed. Hearings will be held in Phoenix and Tucson Arizona.

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 Plan was made available on the DES website meeting ADA standards, and copies were made available for review at all District Child Care Administration offices. In addition, DES created an email address CCDFStatePlan@azdes.gov as an additional means of communication for the public to provide comments. The mailbox is monitored Mondays through Saturdays.

How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? All information provided by the public was captured and considered for possible impacts and implementation based on current statutory language and available funding. Additionally, any factual errors, confusing language, or other reasonable edits suggested in the public hearings were corrected or clarified.

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 at https://www.acf.hhs.gov/occ/resource/pi-2009-01.)

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://des.az.gov/services/basic-needs/child-care-home

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: It was posted on the DES website/CCA landing page. Notifications of Future Plan Amendments will be sent to Committee members in the same manner as the notice of public hearings.
- Working with child care resource and referral agencies. Describe: ___
- Providing translation in other languages. Describe: ___
Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: The DES Public Information Office submits posts to Facebook.
Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: Copies of the notice of public hearings were emailed to other parties such as Tribal and local units of government, members of the Child Care Advisory Committee, and other groups that may have an interest in child care. Notifications of Future Plan Amendments will be sent to stakeholders in the same manner as the notice of public hearings.

☐ Other. Describe: ____

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.

☒ (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals and process: DES is in a unique position to utilize the two-generation approach to positively impact the cycle of poverty and unemployment. Strategies to strengthen families in this regard include: employment, education, job
training, parent engagement, consumer education, and access to high quality child
care experiences. DES combines most of the State’s social service programs within a
single agency. These include Child Care Assistance, Employment and Vocational
Services, Part C of the Individuals with Disabilities Education Act, Supplemental
Nutrition Assistance Program, Temporary Assistance to Needy Families, the Refugee
Resettlement Program, and Child Support Services. As a result, there is an
opportunity to build upon the existing interdepartmental communication and
coordination and to promote interagency collaboration and system integration
within the DES Security strategic initiatives. Through these activities it is expected
that families will be able to better identify their own goals and determine how to
mobilize formal and informal resources to support themselves and their children.
Within DES, there is an increased focus on building adult capabilities to improve child
and family outcomes. Utilizing a resource-based capacity-building approach to
support families of young children and providing high quality care during a child’s
formative years has the potential to pre-emptively close the academic achievement
gap between low and high-income students. The dual focus of supporting the adults
in children’s lives and ensuring that children have positive outcomes will have a
significant positive impact on socioeconomic outcomes for all. Engagement with
other State agency partners, early childhood programs and community partners
began the day the CCDBG Reauthorization was signed in 2014. The Arizona
Department of Economic Security Child Care Advisory Committee is the primary
vehicle for coordinating with representatives of general-purpose local government.
For issues related to ongoing service delivery, the CCDF Lead Agency meets with the
Child Care Advisory Committee every quarter. The Child Care Advisory Committee
includes individuals that represent statewide organizations with local affiliations,
Tribes, cities, and councils of governments that administer federal early childhood
services. Additional representation of this Committee includes, local governments,
other federal, state, local, Tribal, and private agencies providing childcare and early
childhood development services such as Head Start programs, resource and referral
agencies, child welfare advocacy groups, Tribal organizations, family childcare
providers, human service advocacy organizations, employer supported childcare
programs, Child and Adult Care Food Program sponsors, parents and consumers,
before and after school programs, public school childcare programs, business groups,
sectarian organizations and childcare programs, Child Development Associate
programs, and organizations that accredit childcare programs. Also participating in
this Committee are representatives from State agencies including, the Arizona Early
Childhood Development and Health Board (First Things First), the Governor’s Office
of Youth, Faith and Family, the Arizona Department of Education, and the Arizona
Department of Health Services. The Governor’s Office of Youth, Faith and Family
includes the Division for Community and Youth Development, Division for Children,
Division for Women, and the Division for Substance Abuse and Prevention. The
Arizona Department of Education administers the Child and Adult Care Food
Program, as well as the Preschool Handicapped, and Title I programs. The Arizona
Department of Health Services administers the Bureau of Child Care Licensure, Behavioral Health Services, and the Office of Women and Children’s Health. Members of the Child Care Advisory Committee are provided with information pertaining to child care subsidy caseload and cost of care, issues regarding service delivery, expulsion prevention updates and any other available information that affects early care and education programs throughout Arizona. Committee members provide recommendations to the DES on programs, activities, and services to improve the quality and availability of child care, which are funded using CCDF Quality funds and Set-Asides.

☒ (REQUIRED) 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 and process: DES partners with the Arizona Early Childhood Development and Health Board (First Things First) in assisting child care providers in Arizona to improve the quality of child care and to provide supports for professional development of the child care workforce caring for CCDF eligible children.

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

☒ (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals and process, including which tribe(s) was consulted: The Inter Tribal Council of Arizona, Inc. is represented on the Child Care Advisory Committee. The purpose of the Inter Tribal Council of Arizona, Inc. is to provide their 21 member Tribes with the means for action on matters that affect them collectively and individually, to promote Tribal sovereignty and to strengthen Tribal governments. The members of the Inter Tribal Council of Arizona, Inc. are: Ak-Chin Indian Community, Cocopah Indian Tribe, Colorado River Indian Tribes, Fort McDowell Yavapai Nation, Fort Mohave Indian Tribe, Gila River Indian Community, Havasupai Tribe, Hopi Tribe, Hualapai Tribe, Kaibab Band of Paiute Indians, Pascua Yaqui Tribe, Pueblo of Zuni, Quechan Tribe, Salt River Pima-Maricopa Indian Community, San Carlos Apache Tribe, San Juan Southern Paiute, Tohono O’odham Nation, Tonto Apache Tribe, White Mountain Apache Tribe, Yavapai-Apache Nation, and the Yavapai-Prescott Indian Tribe.

☐ N/A—There are no Indian tribes and/or tribal organizations in the State.

☒ (REQUIRED) 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 and process: In Arizona, DES, Arizona Early Intervention Program (AzEIP) is the Lead Agency for the Individuals with Disabilities Education Act, Part C and administers a statewide system of supports and services for families of infants and toddlers, birth to three years of age, with disabilities or delays. AzEIP is required, to the extent possible, to provide early intervention services and supports in the child’s natural environment. If determined by the Individualized Family Service Plan, of which the parent is a
member, the child may receive services within the child care setting to support the child’s participation and engagement in the child care routines and activities. AzEIP utilizes a team-based approach to provide services. Every family is assigned to a team and one member of the team is identified as the team lead. The team lead becomes the primary provider of services. The team lead, utilizing coaching practices, assists the parent or caregiver in supporting the child’s development and participation in daily routines. When a team lead provides services in a child care setting, the child care provider is the primary recipient of the support. As a result, the caregiver develops the confidence and competence to support the child’s learning and development throughout the day, which supports the child’s successful participation and continuity in the child care setting, which then supports the parent’s ability to maintain continuous employment, job training and/or education. The added benefit is that the caregiver gains knowledge and skills to better support other children’s learning and development. In addition, FTF convenes the Early Intervention State Partners Group, comprised of statewide and local partners who represent the state agencies and partners across the early education, family support and children’s health sectors involved in providing services and programs to support the developmental needs of children and is representative of urban, rural and tribal areas. In Arizona, there are a variety of partners that comprise the early intervention system. A child’s growth and development are followed through a partnership between families, non-profit and public agencies, health care providers, early educators and other professionals who may work with a family, such as home visitors. Each partner plays a key role in working with families to support a child’s healthy growth and development. Coordinating and aligning the work of these various collaborating partners is crucial in order to ensure that: children receive timely and appropriate screenings and referrals, appropriate prevention, early intervention and treatment services are available, and Children receive the support and services they need to achieve healthy development. The early intervention system is complex and can be difficult for families to navigate with the many partners, various policies and numerous practices that drive the provision of services, including screening, assessment and evaluation, and services and therapies, and the delivery of services across the health care, education and social services sectors. Due to its complexity, it is critical that families have a comprehensive, integrated, coordinated and effective early intervention system of services for their children with developmental concerns, delays and disabilities no matter when, where or how they enter the system. The importance of this is further emphasized when understanding what developmental delays and disabilities are and how common they are among our young children. With the understanding of the complexity of the system, the Group developed strategies and tactics with an emphasis on how to improve policies and coordination, where screening practices and evaluation/assessment processes need improvements, where professional development and capacity building is needed to strengthen the workforce, support for children with mild to moderate delays and how
to identify, improve upon and increase existing interventions, resources and supports for families.

- **(REQUIRED) State/territory office/director for Head Start state collaboration.** Describe the coordination goals and process: DES is working with an Early Head Start (EHS) Child Care Partnership grantee in layering funding sources (EHS and CCDF) to expand accessibility and continuity of care, and to assist children enrolled in the EHS-Child Care Partnership to receive full-day services that meet the needs of their working families. DES continues to develop and expand these collaborative efforts with other EHS-Child Care Partnership grantees.

- **(REQUIRED) State/territory agency responsible for public health, including the agency responsible for immunizations.** Describe the coordination goals and process: The Arizona Department of Health Services (ADHS) is the State agency responsible for public health and is a participating member of the Child Care Advisory Committee, which has provided ongoing feedback into the development of the Plan. ADHS has also assisted in developing key sections of the Plan, particularly in the area of Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings, and Recruit and Retain a Qualified and Effective Workforce. ADHS participates in the Emergency Preparedness CCDBG workgroup, which develops the Statewide Emergency Preparedness Plan that will ensure continuity of child care services during an emergency.

- **(REQUIRED) State/territory agency responsible for employment services/workforce development.** Describe the coordination goals and process: The CCDF Lead Agency is housed within the Arizona Department of Economic Security’s Division of Employment and Rehabilitation Services which assists individuals who are unemployed and underemployed, and those with barriers to employment, to prepare for and obtain gainful employment. The Division’s Workforce Development Administration consists of the employment and training services that support and assist Temporary Assistance to Needy Families (TANF) and non-TANF individuals to secure and maintain employment. The Division’s Reemployment Assistance Administration meets the workforce needs of employers by connecting qualified job seekers with employment opportunities. Coordination within the Division has resulted in shared communication and identification of issues that relate to the provision of child care services to families that are receiving multiple services from the Division. TANF eligibility is handled internally through policies and procedures so that appropriate child care services are provided for TANF recipients. Improved coordination between employment services and child care services ensures TANF recipients have needed supports to achieve independence from TANF and that former TANF recipients can obtain and retain employment.

- **(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).** Describe the coordination goals and process: Through communication with representatives from the Arizona Department of Education, the CCDF Lead Agency receives and shares information regarding programmatic issues, including the status of pre-kindergarten programs and grants. This coordination
includes increasing the quality of early care in identified high-risk areas of the State, particularly areas of high concentration of poverty and identifying opportunities to expand accessibility and continuity of care so children and families have access to full-day services. In addition, coordination has improved efforts to leverage resources related to professional development opportunities, including targeted training and coaching support.

☒ (REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: ADHS coordinates with the CCDF Lead Agency in developing procedures for conducting background checks for licensed providers that serve CCDF children. Representatives also participate in the Arizona Department of Economic Security Child Care Advisory Committee, and play a vital role in the Emergency Preparedness CCDBG workgroup that is developing the Statewide Emergency Preparedness Plan facilitating continuity of child care services during an emergency.

☒ (REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals and process: The CCDF Lead Agency and the Child and Adult Care Food Program (CACFP) representatives meet and communicate regularly to share information regarding child care providers that are involved with both the CACFP and are contracted/certified to provide child care services to CCDF eligible children, ensuring that family child care homes certified by the CCDF Lead Agency participate in the CACFP.

☒ (REQUIRED) 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 and process: Child care for children residing in homeless or domestic violence shelters is available via contract to licensed child care programs operating in homeless or domestic violence shelters. The funding is inclusive of all costs associated with the delivery of this service, which includes training of teachers and other staff and obtaining and retaining national accreditation or the Quality First Star Rating in the quality level for the child care program. Through these contracts, DES is able to work with the contractors who provide child care for children and assist their parents or guardians in attaining necessary life-skill training and obtaining employment to become self-sufficient. DES eligibility workers screen for homelessness during the eligibility determination process in order to appropriately refer homeless families to shelters with onsite child care programs and to determine eligibility and authorize services to accommodate shelter directed activities.

☒ (REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: The CCDF Lead Agency is housed within the Arizona Department of Economic Security's Division of Employment and Rehabilitation Services. The Division's Workforce Development Administration consists of the employment and training services that support and assist Temporary Assistance to Needy Families (TANF) and non-TANF
individuals to secure and maintain employment. The Division’s Reemployment Assistance Administration meets the workforce needs of employers by connecting qualified job seekers with employment opportunities. Coordination within the Division has resulted in shared communication and identification of issues that relate to the provision of child care services to families that are receiving multiple services from the Division. TANF eligibility is handled internally through policies and procedures so that appropriate child care services are provided for TANF recipients. Improved coordination between employment services and child care services ensures TANF recipients have needed supports to achieve independence from TANF and that former TANF recipients can obtain and retain employment.

☒ (REQUIRED) Agency responsible for Medicaid and the state Children’s Health Insurance Program. Describe the coordination goals and process:

Continued coordination with Arizona’s Medicaid system, including the development of policies and procedures related to developmental screenings, is a priority for DES to ensure children eligible for Early and Periodic Screening, Diagnostic and Treatment services have access to them, particularly when developmental concerns are identified. Early identification and treatment of developmental or behavioral concerns will support the child’s continued access and participation in child care programs.

☒ (REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process:

The Arizona Department of Health Services (ADHS) is the State agency responsible for mental health. While representatives from this specific Division within ADHS did not directly participate in the Child Care Advisory meetings, they did have opportunities to provide comments regarding the Plan. However, Southwest Human Development is very involved in the CCDBG Expulsion Prevention Policy and hold the contract for Expulsion Prevention services and training.

☒ (REQUIRED) 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 and process:

DES funds the statewide Child Care Resource and Referral (CCR&R) system. The CCR&R service disseminates information to enable parents to identify the most important quality indicators of child care programs, tracks the accreditation status of providers, and also has developed a checklist for parents to use when assessing child care programs according to quality indicators. The CCR&R’s website also links to the First Things First website and directs parents to Quality First information. Ongoing, effective coordination with the CCR&R regarding consumer education will be necessary to ensure parents are informed of early childhood programs that provide full-day services.

☒ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process:

DES worked closely with The Arizona Center for Afterschool Excellence in developing training that is offered under the quality set aside dollars.
(REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: The CCDF Lead Agency partners with multiple agencies and groups responsible for ensuring Statewide Disaster preparedness. These include the following: Arizona Department of Emergency and Military Affairs, Arizona Department of Health Services, Coyote Crisis Collaborative and Arizona Pediatric Disaster Coalition Advisory Council. All participated in developing the Disaster Preparedness Plan.

The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.

☒ State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: DES staff have been meeting with representatives from the Arizona Department of Education as well as the Early Head Start Child Care Partnership grantees to identify opportunities to coordinate services for families who are enrolled in Early Head Start and eligible, or potentially eligible, for child care subsidies. One of the intended outcomes of this coordination is to expand accessibility and continuity of care, and to assist families enrolled in Early Head Start to receive full-day services.

☒ State/territory institutions for higher education, including community colleges. Describe: Members from community colleges participate in the Child Care Advisory meetings. Additionally, DES partnered with Central Arizona College in developing the Health and Safety training modules for Child Care Providers.

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

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

☐ Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe:

☒ State/territory agency responsible for child welfare. Describe: In Arizona, child welfare programs are administered by the Arizona Department of Child Safety (DCS), which oversees various programs including child protective services, foster care, and adoptions. DES communicates and works closely with the DCS on a regular basis to resolve issues such as developing, implementing, and enhancing referral processes to ensure families referred for services have timely and accurate child care authorizations. Representatives from DCS and members of the Child Care Advisory Committee work to continuously improve the lines of communication and increase understanding of issues that affect individual child care providers that care for children who are involved in the child welfare system. In Arizona, children involved with DCS receive priority for CCDF funded child care services and are served via direct referral from the DCS case manager to the DES. When funding becomes limited, DCS children are not subject to the Priority Waiting List. DES eligibility workers facilitate the transition from DCS child care for foster children to the appropriate child care eligibility category when the DCS case closes. DES continues to partner with DCS...
in activities to ensure children are placed in quality child care. These activities include training DCS staff through the Expulsion Prevention contract with Southwest Human Development

☑ State/territory liaison for military child care programs. Describe: DES communicates and coordinates with military child care programs on an as needed case-by-case basis. This may occur at the local level at which the military program is geographically situated. Working with military child care representatives has resulted in CCDF eligible families being able to use family child care homes approved by military child care programs.

☑ Provider groups or associations. Describe: The Arizona Early Childhood Education Association is a non-profit organization that represents licensed child care providers statewide. The Association participates in the Arizona Department of Economic Security Child Care Advisory Committee and communicates with the CCDF Lead Agency on a regular basis to share ideas, concerns, and expertise on issues that impact the delivery of child care services provided in Arizona.

☐ Parent groups or organizations. Describe:

☑ Other. Describe: DES is involved in activities and efforts throughout the State. This includes working with local groups, City of Tucson, One Stop offices, United Way groups, West Valley Human Services Alliance, which includes the cities of Peoria, Surprise, Glendale, Avondale, and Buckeye, as well as community organizations such as, Arizonans for the Protection of Exploited Children, Arizona Bridge to Recovery, United Methodist Outreach Ministries, and the Maricopa Association of Governments. DES also participates in a data sharing committee. This committee is made up of representatives from the Arizona Department of Education, DES, Arizona Early Childhood Development and Health Board (First Things First), and ADHS. Results of these coordination efforts include: better coordination of service delivery, development of collaborative initiatives and sharing of information on child care issues and needs, improvement of services provided to grandparents, implementing child care assistance for One Stop customers entering employment training, and, collaboration focusing on all aspects of child care, including provision, literacy, health, and advocacy. The committee’s work is directed toward achieving a greater degree of consumer protection and improved quality of child care services through interagency communication, coordination, and consistency.

1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

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 programs identified in 1.4.1 (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”
  b) Which funds you will combine
  c) 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
  d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?
  e) How are the funds tracked and method of oversight

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)? Check all that apply.

Note: The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

Use of pre-K for Maintenance of Effort: The CCDF Final Rule clarifies that public pre-K funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate pre-K 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 pre-K 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)).

☐ N/A—The territory is not required to meet CCDF matching and MOE requirements

☒ 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.

• If checked, identify the source of funds: Tobacco Tax funds appropriated to First Things First
• If known, identify the estimated amount of public funds that the Lead Agency will receive: FTF collaborates with the Governor's Office and DES in establishing a Memorandum of Understanding (MOU) in the amount of $30M to leverage FTF investments as the MOE and State match. As a result of the MOU, Arizona is able to draw down an additional $37.4M in CCDF funds in Federal Fiscal Year 2019 (projected).

☐ 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)).

• If checked, are those funds:
  ☐ Donated directly to the State?
  ☐ Donated to a separate entity(ies) designated to receive private donated funds?

• If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: 
• If known, identify the estimated amount of private donated funds that the Lead Agency will receive: $

☐ State expenditures for pre-K 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 preK expenditures (not to exceed 30 percent): 

• 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: 
• If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: $
• Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: 

☐ State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,
• The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).
☐ No  ☐ Yes
● Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:

● Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent):

● If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care:

● If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: $

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 the entities with which and the levels at which the state/territory is partnering (level—state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)). DES is engaging with State and local community programs to build upon and leverage existing resources to increase the availability, affordability, and quality of child care, and to actively promote public/private partnerships to continue these efforts. DES intends to maintain such efforts, and to continue to support and encourage public/private collaborations at the state, regional, and local level. The following information describes several examples of ongoing or planned partnerships in Arizona and their impact on meeting child care needs. DES partnered with several of the Early Head Start-Child Care Partnership grantees in streamlining application processes for families enrolling in Early Head Start and applying for child care subsidies, since Early Head Start requires many of the same documents to verify income eligibility. This partnership reduces the duplicative processes families would have to go through if they were required to fill out the application for CCDF child care subsidies and the Early Head Start application. In addition, DES in partnership with one EHS-Child Care Partnership grantee layer funding sources (EHS and CCDF Child Care subsidies) to expand accessibility and continuity of care, and to assist children enrolled in the EHS-Child Care Partnerships to receive full-day services that meet the needs of their working families. DES continues to develop these partnerships with other Early Head Start-Child Care Partnerships grantees. In addition, DES participates in the Arizona Early Childhood Alliance (AZECA) Alignment Committee, whose primary focus is to raise the quality floor of child care in Arizona. This committee is also
comprised of representatives from other State agencies who deliver early childhood services, community based service providers, child care providers, professional organizations, and advocates from the early childhood community.

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 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, what services are provided and how it is structured and use section 7.6.1 to address 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 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). If yes, describe the following:
  a) What services are provided through the CCR&R organization? **DES funds the statewide Child Care Resource and Referral (CCR&R) system.** The CCR&R
provides referrals to families seeking child care assistance, consumer education information, and information on selecting quality child care.

b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated? The CCDF Lead Agency funds the statewide Child Care Resource and Referral (CCR&R) system. The CCR&R service uses a database to collect, maintain, and disseminate information about the full diversity of child care providers available to families in Arizona. This information is shared through the Child Care Information Line, and on the CCR&R website. If any provider is participating in Arizona’s voluntary Quality Improvement & Rating System, Quality First, this information is tracked and shared in their provider profile via the Information Line and the CCR&R website. Results of monitoring visits is also provided to families. The CCR&R service provides additional resources and information to callers and via the website about other resources such as Temporary Assistance for Needy Families, Head Start and Early Head Start, Low-Income Home Energy Assistance Program, Supplemental Nutrition Assistance Program, Women, Infants and Children program, Child and Adult Care Food Program, and Medicaid for which families may also qualify, and Individuals with Disabilities Education Act programs and services.

1.8 Disaster Preparedness and Response Plan

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 that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body: DES, in coordination with ADHS, and other community partners, developed the Statewide Child Care Disaster Plan, which includes provisions of temporary child care as well as outlining temporary operating standards for child care after a disaster. The Department of Health Services Bureau Chief of Public Health Emergency Preparedness took the lead on this collaborative effort. The CCDF Lead Agency has processes in place for the continuity of child care services after a disaster, and ADHS has temporary operating standards for child care after a disaster; the guidelines of both agencies were compiled into the Statewide Childcare Disaster Plan. These agencies, along with Coyote Crisis Collaborative, the Department of Education, and Inter Tribal Council of Arizona Inc., partnered in the development of the official Statewide Child Care
Disaster Plan, including procedures in place for the provision of temporary child care and temporary operating standards for child care during and after a disaster. These procedures were shared and coordinated with the Arizona Department of Emergency and Military Affairs (DEMA), First Things First and all other relevant State agencies and community partners. The systems no longer act independent of one another, but instead, work cohesively and interdependent of one another.

1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency’s guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster: DES has developed guidelines and processes in place for the continuity of child care services during and after a disaster including continuation of compensation for child care services. ADHS has established guidelines for continuing child care services during or after a disaster including temporary operating standards for child care centers. ADHS has developed a Disaster Emergency Evacuation Preparedness (DEEP) training. The DEEP training includes instruction and guidelines on the development of a Disaster Preparedness and Response Plan for licensed centers and certified group homes including procedures in place for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions. The DEEP training is available and required to all contracted Licensed Centers and Certified Group Homes must take the training and develop a Disaster Preparedness and Response Plan based off the guidelines reviewed in DEEP.

1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: After an emergency or during disaster recovery, DES in coordination with ADHS will coordinate efforts at all levels to ensure children and families are able to find care as soon as possible and that those affected child care centers can begin the process of clean up, rebuilding, or finding a temporary or permanent location.

1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place—evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions: DES Contracted licensed centers and group homes and DES Certified child care providers are required to have plans detailing evacuation, relocation, shelter-in-place, lock-down, communications with and reunification of families, and continuity of operations.

1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers—emergency preparedness training and practice drills as required in 98.41(a)(1)(vii): DES contracted licensed centers, group homes, and DES Certified child care providers are required to have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.6 Provide the link to the website where the statewide child care disaster plan is available: DES is currently finalizing the Statewide Child Care Disaster Plan and will publish the completed plan no later than September 30, 2018. The Plan will be available for viewing at: www.azdes.gov.
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. In this section, Lead Agencies will address how information is made available to families 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.

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, which is made available to parents, providers, and the general public and the ways that it is made available. 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.

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 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.

- ☒ Application in other languages (application document, brochures, provider notices)
- ☒ Informational materials in non-English languages
- ☒ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☒ Bilingual caseworkers or translators available
- ☐ Bilingual outreach workers
- ☒ Partnerships with community-based organizations
☐ Other. Describe: ______

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.

☒ Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
☒ Websites that are accessible (e.g., Section 508 of the Rehabilitation Act)
☐ Caseworkers with specialized training/experience in working with individuals with disabilities
☒ Ensuring accessibility of environments and activities for all children
☒ Partnerships with state and local programs and associations focused on disability-related topics and issues
☐ 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
☒ Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
☒ Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children
☐ 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; 98.32).

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: DES funds the Child Care Resource and Referral (CCR&R). Through the CCR&R contract for services, complaints about child care providers can be submitted through a web-based process on the CCR&R or through a toll-free hot-line. The CCR&R will then route the complaint to the appropriate Agency Link: https://www.arizonachildcare.org/

2.2.2 Describe the Lead Agency’s process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: If the complaint received is regarding a DES Certified Home, DES will investigate the complaint. If the complaint is substantiated, the appropriate action will be taken. If the complaint is on an ADHS Licensed Center or Group Home, ADHS is responsible
for the investigation and taking appropriate actions. Timeframes vary depending on the type of complaint from 1-3 days for investigation and 30 days of receipt of the complaint to finalize investigation. The CCDF Lead Agency will follow up with ADHS to determine the status of the providers contract to provide child care services.

2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: ADHS is responsible for screening, substantiating and responding to complaints for non-CCDF providers. If the complaint is substantiated, the appropriate action will be taken including follow up monitoring.

2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints: DES and ADHS maintain records of substantiated complaints within the child care providers case file as well as within the Child Care Resources and Referral website.

2.2.5 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: DES makes information about substantiated complaints available to the public via the Child Care Resource and Referral (CCR&R) website. All substantiated complaints reflect within the provider's profile on the CCR&R. For DES Certified Homes, individuals may request to view the file in person.

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

Policy is pending.

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)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the 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 deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding 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 link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. 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: The Arizona Child Care Resource and Referral (CCR&R) provides a consumer friendly website for families, child care providers, early childhood professionals and stakeholders. The website disseminates information about regulated child care facilities by
a variety of means. CCR&R service offers information on currently licensed/certified centers and homes both via a toll-free phone line and on the Internet. The site utilizes plain-language accessible to users at various reading levels. Consumer friendly information is integrated within each section of the website. CCR&R is available in both English and Spanish languages. The child care search provides multiple search criteria for individuals to search for providers. The website is also mobile friendly. It is accessible to the public 24 hours a day, seven days a week, that technical features, enhancements, and modifications to the website are clear and user friendly, and provides frequently asked questions (FAQ’s).

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)): As suggested under LEP guidance and estimated populations, the website provides a Spanish language option. A link from the Child Care Resource and Referral website to the Child Care Administration (CCA) internet page also includes the application for CCA assistance in Spanish.

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities: The CCR&R website is currently undergoing enhancements that includes testing to support individuals using assistive technologies, such as screen readers and screen magnification.

2.3.4 Lead Agency 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 link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6: www.arizonachildcare.org.

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: www.arizonachildcare.org.

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11: www.arizonachildcare.org.

2.3.5 List of providers

a) The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. 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.

Provide the website link to the searchable list of child care providers: www.arizonachildcare.org.
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):

☒ License-exempt center-based CCDF providers
☒ License-exempt family child care (FCC) CCDF providers
☒ License-exempt non-CCDF providers
☐ Relative CCDF child care providers
☐ Other. Describe: 

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.

c)  • Licensed providers
☐ Contact information
☐ Enrollment capacity
☐ Years in operation
☐ Provider education and training
☒ Languages spoken
☒ Quality information
☒ Monitoring reports
☐ Other. Describe: 

• License-exempt, non-CCDF providers
☒ Contact information
☒ Enrollment capacity
☐ Years in operation
☐ Provider education and training
☒ Languages spoken
☒ Quality information
☒ Monitoring reports
☐ Other. Describe: 

• License-exempt CCDF center based providers
☒ Contact information
☒ Enrollment capacity
☐ Years in operation
☐ Provider education and training
☒ Languages spoken
☐ Quality information
☐ Monitoring reports
☐ Other. Describe: 

• License-exempt CCDF family child care
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.

How does the Lead Agency determine quality ratings or other quality information to include on the website?

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start Program Performance Standards.
For what types of providers are quality ratings or other indicators of quality available?

- **Licensed CCDF providers.** Describe the quality information: The CCR&R website displays information to users about information about programs that have been quality rated or who are Nationally Accredited. The website provides information to families to help them understand the benefits of quality early care and education.

- **Licensed non-CCDF providers.** Describe the quality information: The CCR&R website displays information to users about information about programs that have been quality rated or who are Nationally Accredited. The website provides information to families to help them understand the benefits of quality early care and education.

- **License-exempt center-based CCDF providers.** Describe the quality information: 

- **License-exempt FCC CCDF providers.** Describe the quality information: The CCR&R website displays information to users about information about programs that have been quality rated or who are Nationally Accredited. The website provides information to families to help them understand the benefits of quality early care and education.

- **License-exempt non-CCDF providers.** Describe the quality information: 

- **Relative child care providers.** Describe the quality information: 

- **Other.** Describe:

2.3.7 Lead Agencies are required to 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 on the consumer education website. These reports must include 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. The reports must be in plain language, 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 when available, going forward (not retrospectively), beginning October 1, 2018.

Certify by responding to the questions below:

What is the Lead Agency’s definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports. Effective October 1, 2018, the Child Care Resource and Referral website (www.arizonachildcare.org) directs users to the "Provider Search" tab; results generated from the search include provider-specific information about the health and safety, licensing or regulatory requirements met by the provider, including the last day of...
inspection and history of violations. These reports are written in plain-language. The website will include a link to reports.

Are monitoring and inspection reports in plain language?

☑ If yes, include a website link to a sample monitoring report. A sample monitoring report is not available. This site, once launched, will display the current Inspections (monitors), Complaints, and Enforcements information attached to the selected provider. This information is interfaced from Department of Health Services (ADHS) and the Arizona Childcare Automated Tracking system (AZCCATS). The website will be [www.arizonachildcare.org](http://www.arizonachildcare.org).

□ If no, describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary. ______

Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

c) ☑ Date of inspection

☑ Health and safety violations, including those violations that resulted in fatalities or serious injuries. Describe how these health and safety violations are prominently displayed. This site ([www.arizonachildcare.org](http://www.arizonachildcare.org)) once launched, will display all applicable information attached to the provider being searched. Once the individual page is selected for the provider, three tabs display at the bottom of the page for the user to review. The tabs, Inspections (monitors), Complaints, and Enforcements display any information attached to the selected provider. This information is interfaced from ADHS and AZCCATS.

□ Corrective action plans taken by the State and/or child care provider. Describe ______

d) The process for correcting inaccuracies in reports. The information displayed is interfaced from ADHS and AZCCATS. Should a discrepancy display, the provider would need to contact the respective entities that house the information to inquire about accuracy and the process for change and/or update.

e) The process for providers to appeal the findings in reports, including the time requirements, and timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded. The connection is a live download from data systems, as soon as the complaint is marked as unsubstantiated it will no longer appear. Appeals for adverse action such as suspension or revocation need to file within 15 calendar days from the date of the notice to the provider.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies 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. DES Certification staff enter inspection data on the database within five calendar days of inspection. DES monitors this data on a weekly basis through metrics and is further verified through an internal audit process.
Describe the process for maintaining monitoring 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)). DES Certified Homes will reflect five years of reports; ADHS Group Homes and Centers will reflect three years of reports. The reports will automatically be removed.

Any additional providers on which the Lead Agency chooses to include reports. Note: Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

☐ License-exempt non-CCDF providers
☐ Relative child care providers
☐ Other. Describe:

Describe:

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 on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.

Certify by providing:

a) 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. DES requires child care providers who are contracted to report injuries or deaths of children occurring in child care to the Lead Agency. Additionally, the Department is in the process of obtaining access to reports reflecting aggregate data of deaths occurring in child care settings from the Department of Health Services.

b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement. A finding of child abuse or neglect becomes substantiated when DCS determines upon completion of its investigation that there is a reason to believe the abuse/neglect took place. "Abuse" means the infliction or allowing of physical injury, impairment of bodily function or disfigurement or the infliction of or allowing another person to cause serious emotional damage as evidenced by severe anxiety, depression, withdrawal or untoward aggressive behavior and which emotional damage is diagnosed by a medical doctor or psychologist and is caused by the acts or omissions of an individual who has the care, custody and control of a child. Abuse includes: (a) Inflicting or allowing sexual abuse pursuant to section A.R.S. § 13-1404, sexual conduct with a minor pursuant to section A.R.S. § 13-1405, sexual assault pursuant to section A.R.S. § 13-1406, molestation of a child pursuant to section A.R.S. § 13-1410, commercial sexual exploitation of a minor pursuant to section A.R.S. § 13-3552, sexual exploitation of a minor pursuant to section A.R.S. § 13-3553, incest pursuant to section A.R.S. § 13-3608 or child sex trafficking pursuant to section A.R.S. § 13-3212. (b) Physical injury that results from permitting a child to enter or remain in any structure or vehicle in which volatile, toxic or flammable chemicals are found or equipment is possessed by any person for the purpose of manufacturing a dangerous drug as defined in section A.R.S. § 13-3401. (c) Unreasonable confinement of a child. "Neglect" or "neglected" means: (a)
The inability or unwillingness of a parent, guardian or custodian of a child to provide that child with supervision, food, clothing, shelter or medical care if that inability or unwillingness causes unreasonable risk of harm to the child’s health or welfare, except if the inability of a parent, guardian or custodian to provide services to meet the needs of a child with a disability or chronic illness is solely the result of the unavailability of reasonable services. (b) Permitting a child to enter or remain in any structure or vehicle in which volatile, toxic or flammable chemicals are found or equipment is possessed by any person for the purposes of manufacturing a dangerous drug as defined in section A.R.S. § 13-3401. (c) A determination by a health professional that a newborn infant was exposed prenatally to a drug or substance listed in section A.R.S. § 13-3401 and that this exposure was not the result of a medical treatment administered to the mother or the newborn infant by a health professional. This subdivision does not expand a health professional’s duty to report neglect based on prenatal exposure to a drug or substance listed in section A.R.S. § 13-3401 beyond the requirements prescribed pursuant to section A.R.S. § 13-3620, subsection E. The determination by the health professional shall be based on one or more of the following: (i) Clinical indicators in the prenatal period including maternal and newborn presentation. (ii) History of substance use or abuse. (iii) Medical history. (iv) Results of a toxicology or other laboratory test on the mother or the newborn infant. (d) Diagnosis by a health professional of an infant under one year of age with clinical findings consistent with fetal alcohol syndrome or fetal alcohol effects. (e) Deliberate exposure of a child by a parent, guardian or custodian to sexual conduct as defined in section A.R.S. § 13-3551 or to sexual contact, oral sexual contact or sexual intercourse as defined in section A.R.S. § 13-1401, bestiality as prescribed in section A.R.S. § 13-1411 or explicit sexual materials as defined in section A.R.S. § 13-3507. (f) Any of the following acts committed by the child’s parent, guardian or custodian with reckless disregard as to whether the child is physically present: (i) Sexual contact as defined in section A.R.S. § 13-1401. (ii) Oral sexual contact as defined in section A.R.S. § 13-1401. (iii) Sexual intercourse as defined in section A.R.S. § 13-1401. (iv) Bestiality as prescribed in section A.R.S. § 13-1411.

c) The definition of “serious injury” used by the Lead Agency for this requirement. "Serious physical injury" means an injury that is diagnosed by a medical doctor and that does anyone or a combination of the following: (a) Creates a reasonable risk of death. (b) Causes serious or permanent disfigurement. (c) Causes significant physical pain. (d) Causes serious impairment of health. (e) Causes the loss or protracted impairment of an organ or limb. (f) Is the result of sexual abuse pursuant to section A.R.S. § 13-1404, sexual conduct with a minor pursuant to section A.R.S. § 13-1405, sexual assault pursuant to section A.R.S. § 13-1406, molestation of a child pursuant to section A.R.S. § 13-1410, child sex trafficking pursuant to section A.R.S. § 13-3212, commercial sexual exploitation of a minor pursuant to section A.R.S. § 13-3552, sexual exploitation of a minor pursuant to section A.R.S. § 13-3553 or incest pursuant to section A.R.S. § 13-3608.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted. Still Pending

2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. 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: The Child Care Resource and Referral agency is the consumer education website. The link is www.arizonachildcare.org.
2.3.10 The consumer education website should 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. Describe and include a website link to this information: The consumer education website reflects information on how parents can contact the Lead Agency.

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

2.3.12 Other. Identify and describe the components that are still pending per the instructions on CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction. The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted is still pending as the Lead Agency is working to obtain the information from the Department of Health Services.

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 preK, 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 CCR&R service operates statewide and collects information and screens families regarding their income levels. Based on their responses and identified income categories, the CCR&R service will provide referrals to DES or other State Agencies as a strategy to identify families who may be eligible for child care assistance, First Things First Scholarships or Head Start programs. In addition, the First Things First website which includes information across all domains of development as well as resources such as the parent kit, birth to five helpline, podcasts, and blogs all of which support parents in the care and education of their children.

2.4.2 The partnerships formed to make information about the availability of child care services available to families. DES works with a variety of agencies and community organizations, using multiple methods, to ensure outreach efforts are widespread throughout the State. Availability of child care services is promoted via the CCR&R service, as well as the Department’s Family Assistance Administration (TANF Lead Agency) and the Arizona Early Intervention Program (IDEA, Part C Lead Agency). Outreach efforts are coordinated with the Arizona Department of Education, the Arizona Department of Child Safety, the Arizona Department of Health Services home visiting programs, Early Head Start and Head Start,
Early Head Start-Child Care Partnerships, public schools, community based organizations, the IDEA, Part D, Parent Training and Information Center, contractors, and other government offices. The CCR&R service oversees Resource and Referral Specialists who assist callers statewide through the Child Care Information Line to offer information to anyone who needs services about child care assistance, what information is needed to apply, where and how to access an application as well as information about their local Child Care Administration office where they can submit their application.

2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.

- Temporary Assistance for Needy Families program: DES informs eligible parents verbally about available human service programs including TANF. Additionally, information is posted on The Child Care Resource and Referral.
- Head Start and Early Head Start programs: DES informs families about Head Start and Early Head Start Programs both verbally and through information posted on the Child Care Resource and Referral website.
- Low Income Home Energy Assistance Program (LIHEAP): DES informs families about Head Start and Early Head Start Programs both verbally and through information posted on the Child Care Resource and Referral website.
- Supplemental Nutrition Assistance Programs (SNAP) Program: DES informs families about Supplemental Nutrition Assistance (SNAP) both verbally and through information posted on the Child Care Resource and Referral website.
- Women, Infants, and Children Program (WIC) program: DES informs families about Women, Infants, and Children Program (WIC) both verbally and through information posted on the Child Care Resource and Referral website.
- Child and Adult Care Food Program (CACFP): DES informs families about Child and Adult Care Food Program (CACFP) both verbally and through information posted on the Child Care Resource and Referral website.
- Medicaid and Children's Health Insurance Program (CHIP): DES informs families about Medicaid and Children's Health Insurance Program (CHIP) both verbally and through information posted on the Child Care Resource and Referral website.
- Programs carried out under IDEA Part B, Section 619 and Part C: DES Agency informs eligible parents verbally about other early childhood programs including Parents Partners Plus and Arizona Early Intervention Program. The Child Care Resource and Referral informs parents about other early childhood programs including Birth to Five Helpline, Reading Rockets, Zero to Three and the Arizona Early Intervention Program.

2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including
physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information. DES contracts with the Child Care Resource and Referral to make information available about research and best practices in the child development to parents of eligible children, providers, and the general public through outreach activities and the referral phone line. The information available to parents of eligible children, the general public, and providers includes information on meaningful parent, family engagement, and professional development opportunities and community resources. In addition, information on Zero to Three, Reading Rockets, Birth to Five Helpline, AzEIP, and Parent Information Network is available on the website. In addition, parents of eligible children receive information on child development and other resources during the eligibility intake process.

2.4.5 Describe how information on the Lead Agency’s policies regarding the social-emotional and behavioral issues and early childhood 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. Currently, DES contracts with CCR&R to disseminate information regarding social-emotional and early childhood mental health of young children to parents through the CCR&R website. Additionally, parents receive this information through the eligibility process. The information includes the benefits of selecting quality early care and education and information for families to help support their child’s learning and development. In addition, the website reflects information on accreditation or Quality levels achieved by child care programs and are contained in the child care facility search.

2.4.6 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. DES, in partnership with Southwest Human Development, has created a policy around expulsion prevention. The policy is required for all providers who are receiving CCDF funds and included in their contracts with the Lead Agency. The policy is shared with families, providers, and the general public on the Arizona Child Care Resource and Referral website.

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of 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 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)). 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)).

2.5.1 Certify by describing:

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)). Arizona Early Intervention Program (AzEIP), one of the programs offered by DES, is Arizona’s statewide system of services and supports for families of infants and toddlers, birth to three years of age, with delays or disabilities. AzEIP is designed to carry out the functions and activities of administering the system. AzEIP works within the Division of Developmental Disabilities (DDD), also housed within DES, and partners with ADHS, the Arizona State Schools for the Deaf and the Blind, the Arizona Department of Education, the Arizona Health Care Cost Containment System (Arizona’s Medicaid agency) and other community organizations. The resources for families and general public are available through AzEIP website.

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 Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). DES through CCR&R and internal staff provides child care providers, families, and the general public with information regarding Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program.

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. DES ensures the information on services offered by AzEIP are available to parents who are applying for child care assistance. An Eligibility Specialist discusses the availability of services offered by other divisions of the Lead Agency including AzEIP and DDD during application interview process. The brochure titled “A Checklist of Your Child’s Growth from Birth to Five” is included in the information packet that is distributed to applicants during the application process. All parents are informed of the CCR&R website as a resource to obtain additional information.

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. When a child has been identified as suspected of having a developmental delay or disability, a referral may be made by families, physicians, hospitals and others in the medical community, schools, or child care providers. The referral can be made using the online referral application available through AzEIP website at https://extranet.azdes.gov/azeip/AzeipREF/Forms/Categories.aspx. Upon receipt of a referral, each child undergoes screening, evaluation, eligibility determination, and, if eligible, assessment.

How child care providers receive this information through training and professional development. Arizona Early Childhood Workforce Registry offers a variety of training topics which includes: Ages and Stages Questionnaire-3 (ASQ-3), Assessing Young
2.6 Consumer Statement for Parents Receiving CCDF Funds

1) 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. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

2.6.1 Certify by describing:

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement. DES prepares information packets for all families that apply for Child Care Assistance. The packet includes general information regarding different types of child care providers and its regulatory agencies. The CCR&R website provides the CCDF parents and the general public specific information about the child care providers they select or consider.

b) What is included in the statement, including when the consumer statement is provided to families. The following information is included in the statement on the CCR&R website: provider’s general information, location on a map, a type of provider, capacity, hours of operation, accreditation, and quality rating status, CACFP, transportation, education, safety, and financial assistance. The facility and complaint information section contains the history of inspection reports, complaints filed against the provider, and enforcement actions taken against the provider. The brochure for CCR&R with its website address is included in the information packets that are provided to the CCDF families during the interview process.

Provide a link to a sample consumer statement or a description if a link is not available. https://10.223.210.6/Provider/ProviderDetails?ProviderId=184

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 periods, 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 not 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, procedures for the enrollment of children experiencing homelessness and children in foster care, if served, pending the completion of documentation, are required.

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. 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.

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)).

3.1.1 Eligibility criteria based on a child’s age

a) The CCDF program serves children from 0 (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 ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care (658E(c)(3)(B); 658P(3))?

☒ No
☐ Yes, and the upper age is ______ (may not equal or exceed age 19). If yes, provide the Lead Agency definition of physical and/or mental incapacity: ______

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

☒ No
☐ Yes, and the upper age is ______ (may not equal or exceed age 19).

How does the Lead Agency define the following eligibility terms?

“residing with”: Means to live in the same household of a parent, guardian or other person standing in loco parentis, and who has legal responsibility for the child.
"in loco parentis": Means an individual who has legal guardianship or who has initiated the process of legal guardianship; or is a caretaker relative who exercises responsibility for the day-to-day physical care, guidance and support of a child who physically resides with the relative and; who is by blood, adoption or marriage a grandparent, great-grandparent, sibling of the whole or half blood, stepbrother, stepsister, aunt, uncle, great-aunt, great-uncle or first cousin.

3.1.2 Eligibility criteria based on reason for care

How does the Lead Agency define “working or attending a job training and educational program” for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

a) “Working” (including activities and any hour requirements): Means the performance of duties on a regular basis for wages or monetary compensation.

“Job training” (including activities and any hour requirements): Means to be present, at an activity outside of the individual’s home on a regular and acceptable basis, as determined by the DES Jobs Program or contracted Jobs vendor or homeless/domestic violence shelter case manager. If an individual is a TANF recipient and is required to participate in the DES Jobs Program, child care services for any job training and educational program must be approved by the Jobs Program or contracted Jobs vendor. Attendance at structured work readiness activities (typically involving structured classes and employment preparation activities) as required by a homeless or domestic violence shelter are covered as part of the shelter case plan.

“Education” (including activities and any hour requirements): Means participation in an activity outside of the individual’s home, which is a structured program, with a goal of, or in preparation for, employment as follows: 1) High school or its equivalent or remedial education activities reasonably related to obtaining a high school diploma or its equivalent if the individual engaged in the activity is a teen parent; 2) Other education and training activities are allowable if the eligible parent who needs child care is working a monthly average of at least 20 hours per week, the education and training activity is related to an employment goal and the student maintains satisfactory progress and remains in good standing with the educational institution; such as college or trade/vocational activities; such as high school, General Educational Development (G.E.D) classes, English for Speakers of Other Languages (E.S.O.L) classes or remedial educational activities.

“Attending job training or education” (e.g. number of hours, travel time): Education and training activities are allowable if the eligible parent who needs child care is working a monthly average of at least 20 hours per week, the education and training activity is related to an employment goal and the student maintains satisfactory progress and remains in good standing with the educational institution. The education and training activity that includes the actual classroom hours and travel time are covered under full time child care or six hours or more per day.

b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?
No. If no, describe the additional work requirements: There is a minimum of 20 hour work requirement in order to receive supplemental Child Care Assistance for education and training activities that are reasonably related to employment goals. The 20 hour work requirement does not apply to teen parents in high school, or its equivalent or remedial education activities reasonably related to obtaining a high school diploma or its equivalent.

☐ Yes. If yes, describe the policy or procedure:

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

c) ☐ No

☒ Yes. If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility): If an individual is a TANF recipient and is required to participate in the DES Jobs Program, child care services for any job training and educational program must be approved by the Jobs Program or contracted Jobs vendor. Attendance at structured work readiness activities (typically involving structured classes and employment preparation activities) as required by a homeless or domestic violence shelter are covered as part of the shelter case plan.

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

☐ No

☒ Yes. If yes:

i. Please provide the Lead Agency’s definition of “protective services”: a) A child who needs child care as specified in a Department of Child Safety or foster care case plan and who is referred for child care services by a Department of Child Safety case manager; or b) Special circumstances families who are unable to provide child care for a portion of a twenty-four hour day due to a crisis situation of domestic violence or homelessness, a physical, mental, emotional, or medical condition, or participation in a drug treatment or drug rehabilitation program or court ordered community service.

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 (658E(c)(5))?  
☐ No  ☒ Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?  
☐ No  ☒ Yes

3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.

How does the Lead Agency define “income” for the purposes of eligibility at the point of initial determination? Income is monetary compensation received during a time period in exchange for labor or services, from the sale of goods or property, or as profit from financial investments. Income for the purposes of determining child care assistance eligibility is the combined gross monthly earned income and unearned income of all individuals included in family size. If the gross monthly income for the family is less than or equal to 165 percent of the Federal Poverty Level, the family meets initial income eligibility requirements for Child Care Assistance. If the gross monthly income for the family exceeds 165 percent of the Federal Poverty Level, the family does not meet initial income eligibility requirements for Child Care Assistance. The gross countable monthly income of a family includes: Gross earnings received for work including wages, salary, armed forces pay (base pay only), commissions, tips, overtime, piece-rate payments, and cash bonuses earned. Net income from self-employment, Social Security payments before deductions for medical insurance including Social Security benefits and "survivors" benefits, and permanent disability insurance payments made by the Social Security Administration. Railroad retirement insurance income, Interest on savings/checking accounts. Dividends from stocks, bonds, or royalties (interest on Series H United States Government Savings bonds is prorated on a monthly basis), Income from estates or trusts. Net rental income (Deduct the cost of repairs, utilities paid, maintenance, insurance and mortgage payments for the month). Income from boarders or lodgers (only one-third of the amount charge is counted). Advances or draws from a company, corporation, or business partnership. Advances, draws, or loans from: A sole proprietorship to its owner or owner's spouse, or from a single member Limited Liability Company (LLC or PLLC) to its managing member or managing member's spouse. Mortgage payments received on the sale of a home or property when the loan is carried by someone in the household. If payments are received in advance of when they are due, they are counted in the month they are intended for. Public assistance payments including payments from the following programs: Cash Assistance, Supplemental Security Income (SSI), State Supplementary Payments (SSP), General Assistance (GA), Bureau of Indian Affairs General Assistance (BIAGA), and Tuberculosis Control (TC). (This is usually a monthly payment. Count the gross amount regardless of whether or not the payment has been reduced for an overpayment or sanction). Pensions and annuities including pensions or retirement benefits paid to a retired person or their survivors by a former employer or by a union, or distributions or withdrawals from an individual retirement account. Unemployment Insurance (UI) payments including payments from government unemployment insurance agencies or private companies during periods of
unemployment and any strike benefits from union funds. Count the gross amount before any deductions. Worker’s compensation payments. Money received from the AmeriCorps VISTA Program when the adjusted hourly payment is equal to or greater than federal minimum wage. Current alimony or spousal maintenance payments. Current child support payments. Guardianship subsidy payments made to permanent guardians for children living in the home. (The income from the subsidy payment is the guardian’s, not the child(ren)). Veterans Administration pensions including benefits and disability payments. Cash gifts received on a monthly (or regular) basis from relatives, other individuals, and private organizations. Money received through the lottery, sweepstakes, contests, or through gambling, whether received on an annuity or lump sum basis. Medical reimbursements, Health Savings Accounts (HSA), cafeteria plans and flex credits are considered questionable income. CCA staff must find out if the money can be cashed out by the client when the client does not purchase insurance or other benefits the money is intended for. The amount of court ordered child support that is paid each month is subtracted from the total monthly gross countable income.

Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) 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. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of SMI ($/Month)</th>
<th>(b) 85% of SMI ($/Month)</th>
<th>(IF APPLICABLE) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI</th>
<th>(IF APPLICABLE) (% of SMI) Income Level if Lower Than 85% of Current SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$2978</td>
<td>$2531</td>
<td>$1659 55%</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>$3894</td>
<td>$3310</td>
<td>$2235 57%</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>$4809</td>
<td>$4088</td>
<td>$2809 58%</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>$5726</td>
<td>$4867</td>
<td>$3383 59%</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$6641</td>
<td>$5645</td>
<td>$3959 60%</td>
<td></td>
</tr>
</tbody>
</table>

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)). N/A

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-im2017-03.
SMI source and year: **FFY 2018 / LIHEAP**

Identify the most populous area of the State used to complete the chart above.  **The above table is based off of statewide data.**

What was the date that these eligibility limits in column (c) became effective?  **October 1, 2017.**

d) Provide the citation or link, if available, for the income eligibility limits.

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)).

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

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: 

3.1.5 Describe any additional eligibility conditions or priority rules, which should only be applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).  **N/A**

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)). 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.

   - ☒ Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents’ work schedules
   - ☒ Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
   - ☐ Establishing minimum eligibility periods greater than 12 months
   - ☐ Using cross-enrollment or referrals to other public benefits
   - ☐ 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
   - ☐ Providing more intensive case management for families with children with multiple risk factors;
   - ☐ 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
   - ☒ Other. Describe: **DES ensures all families have access to receive age and developmentally appropriate care for their children including children with special needs. To support children with special needs to participate in quality child care, the enhanced rate is offered to child care providers/facilities that provide quality inclusive child care services. The policy and procedures are implemented to ensure**
statewide standard process for verification and approval process for children who require increased supervision, modified equipment, modified activities, and/or a modified facility within child care settings. During an application process, a child with special needs is identified on the application form. The applicant can check the appropriate box for IEP, IFSP, ISP, 504 Plan or the diagnosis by a physician. After verification is made, the child is eligible to receive enhanced services for the entire 12-month eligibility period, as long as all other eligibility criteria are met, by a qualified child care provider who is either nationally accredited or maintains 3-, 4- or 5-Star rating through Arizona’s quality rating system. It is Arizona’s intention to increase continuity of care for children with special needs and their families by matching the children with a qualified child care provider.

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

Lead Agencies are required to provide for 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. 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 establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

i. 85 percent of SMI for a family of the same size
ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency’s initial eligibility threshold that:

(A) Takes into account the typical household budget of a low-income family
(B) Provides justification that the second eligibility threshold is:
   (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
   (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

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 copayment restrictions, which do not apply to a graduated phase-out. To help families transition from
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.

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.

☐ N/A. The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.

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

• Describe the policies and procedures. A graduated phase-out period provides three months of child care assistance when a family’s gross monthly income exceeds 165 percent of the Federal Poverty Level (FPL) but remains at or below 85 percent of the State Median Income (SMI) at the time of redetermination application. The period allows a family to continue accessing three months of child care assistance to help them transitioning off from the program without unnecessary disruption as they increase their family income. If the client’s family income falls to or below 165 percent FPL during the graduated phase-out period, the client becomes eligible to receive Child Care Assistance through the end of the new 12-month eligibility period beyond three months of child care already authorized.

• Provide the citation for this policy or procedure. CCA 2-17-01. Twelve-Month Redetermination CCA 2-17-01-01. Graduated Phase-Out Period 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.

• Provide the second tier of eligibility for a family of three.

• Describe how the second eligibility threshold:

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

  ii. 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: ☐

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

  iv. Provide the citation for this policy or procedure: ☐

☐ Other. Identify and describe the components that are still pending per the instructions on CCDF Plan Response Options for Areas Where Implementation Is Still in Progress in the introduction. ☐
b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

☒ No
☐ Yes

i. If yes, describe how the Lead Agency gradually adjusts copays 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 3.3.3 of the Plan.)

☐ No.
☐ Yes. Describe:

3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(e)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family co-payments (98.21(c)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family co-payments.

☐ Average the family's earnings over a period of time (i.e., 12 months). Describe:
☒ Request earning statements that are most representative of the family's monthly income. Describe: During initial determination and redetermination application process, if an applicant's family income is above 165 percent of FPL on the application form, an Eligibility Specialist is required to ask the applicant whether the family income fluctuates. The Lead Agency defines “fluctuation in earnings” as irregular income that increases or decreases from pay period to pay period, which the most recent pay stub does not accurately reflect the family income when the income is converted to a monthly amount. If the applicant indicates that the income fluctuates, the applicant may submit verification of income for the past three calendar months. Upon receipt of verification, the average income is calculated to be used for eligibility determination. Once a client is determined eligible and if there is an increase in income that may cause the family income to exceed 85 percent of SMI, the client must submit the income verification for the past three months; therefore, the income calculation is based on the average income.

☐ Deduct temporary or irregular increases in wages from the family’s standard income level. Describe:
☐ Other. Describe:

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

☒ Applicant identity. Describe: An applicant self-reports the identity on the application form by providing legal name, date of birth, social security number, and marital status.

☒ Applicant’s relationship to the child. Describe: If an applicant is a caretaker relative, verification of relationship for the caretaker relative and the related child is required. When the caretaker relative is unable to provide verification of relationship and an Eligibility Specialist is unable to obtain verification of relationship via any other method, the caretaker relative is notified that he/she must pursue Legal Guardianship in order to be eligible for Child Care Assistance.

☒ Child’s information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: DES collects the following information for eligibility determination: name, relationship to the applicant, date of birth, and the parents’ names. The information is collected on a declaratory basis.

☒ Work. Describe: The work information for the family members who are included in the family size is collected for the purpose of determining family income and availability of care. The work information is verified using system verification, hard copy/written verification, collateral contact, and in extreme cases, client’s self-statement.

☒ Job training or educational program. Describe: DES only accepts Job Training as an eligible activity for Child Care Assistance for Jobs participants only. The Jobs Participants are Cash Assistance participants under TANF, and they receive child care while participating in jobs-approved work activities. The Jobs Program monitors the job training activity. The educational program is only verified for the clients who are receiving child care under the Block Grant Work Teen Program.

☒ Family income. Describe: The collection and verification of family income is conducted in the same manner as the work verification.

☒ Household composition. Describe: The household composition is self-reported on the application form and confirmed during the interview session.

☒ Applicant residence. Describe: The applicant residence is self-reported on the application form and confirmed during the interview session.

☐ Other. Describe: 

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

☒ Time limit for making eligibility determinations. Describe length of time: DES must complete the eligibility determination to approve or deny an application/referral within 30 calendar days of the application file date or referral receipt date unless the
application/referral is withdrawn or rendered moot because the applicant has died or cannot be located; or there is a delay resulting from the request for additional verification.

☒ Track and monitor the eligibility determination process
☐ Other. Describe: Click or tap here to enter text.
☐ None

3.1.11 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: The Division of Benefits and Medical Eligibility within the Arizona Department of Economic Security

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

- “Appropriate child care”: Means child care that is licensed by ADHS or certified by the DES, (CCDF Lead Agency).
- “Reasonable distance”: Means child care that is available when the total travel time from a TANF participant’s home, to the child care provider, and the work activity, is less than one hour one-way by vehicular transportation; or less than ½ hour one-way if the only mode of transportation is walking.
- "Unsuitability of informal child care": Means child care that is available through a relative provider, but the recipient declares in writing that the provider is inappropriate based on factors such as, that the relative provider: a) has a history of child neglect or abuse; b) is experiencing domestic violence; c) has a history of serious crime; d) is a drug abuser; e) has an emotional, mental, or physical condition which prevents the relative from providing safe care; or f) resides in a home which is unsafe for children.
- “Affordable child care arrangements”: Means child care that is available when the cost of care is equal to or less than the amount that DES, (CCDF Lead Agency) will pay.
How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?

☑ In writing
☑ Verbally
☐ Other. Describe: 

c) Provide the citation for the TANF policy or procedure:

d) 3.2 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).

3.2.1 Describe how the Lead Agency defines:

a) “Children with special needs”: Means children with a disability that requires increased supervision, modified equipment, modified activities and/or a modified facility to perform age-appropriate activities within a child care setting. Same priority as other CCDF families, with higher rates for providers caring for children with special needs who require additional care.

b) “Families with very low incomes”: Means families whose household income is at or below 100 percent FPL. These families are prioritized above other CCDF families for services when a Priority Waiting List is in place and a Priority Wait List release occurs.

3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.

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

☐ Prioritize for enrollment
☐ Serve without placing these populations on waiting lists

b) ☑ Waive co-payments
☐ Pay higher rates for access to higher quality care
☐ Use grants or contracts to reserve slots for priority populations
☐ Other. Describe: 

Identify how services are prioritized for families with very low incomes. Check all that apply:
Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- ☒ Prioritize for enrollment
- ☐ Serve without placing these populations on waiting lists
- ☐ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☐ Other. Describe: DES has prioritized homeless families residing in homeless shelters above all others when funding becomes limited; these families are not subject to our waiting list.

Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- ☐ Prioritize for enrollment
- ☒ Serve without placing these populations on waiting lists
- ☐ Waive co-payments
- ☐ Pay higher rates for access to higher quality care
- ☐ Use grants or contracts to reserve slots for priority populations
- ☐ Other. Describe:

3.2.3 List and define any other priority groups established by the Lead Agency. Children who are in the Child Welfare System.

3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3. Children in the Child Welfare System are not subject to the waiting list.

3.2.5 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 TA to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (addressed in section 6), and (3) conduct specific outreach to families experiencing homelessness(658E(c)(3); 98.51).

Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. Providers give homeless families additional time as needed to comply with immunization requirements.
Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

☐  Lead Agency accepts applications at local community-based locations
☒  Partnerships with community-based organizations
☒  Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
☐  Other: _____

*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)).

3.2.6 Lead Agencies must establish a grace period that allows children experiencing homelessness 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 the Lead Agency's CCDF Rule). *Providers give homeless families additional time as needed to comply with immunization requirements.* Provide the citation for this policy and procedure. A.R.S. 15-872(I)
- Children who are in foster care. *Providers give foster parents additional time as needed to comply with immunization requirements.* The policy citation will be CCA 3-19-01 "Immunization Requirements for Children 13 and under." It is not finalized. The Article 52 will be updated as soon as we receive an exemption from the Governor’s office. Provide the citation for this policy and procedure. A.A.C. R6-5219(F)(3)

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)). DES has partnered with the Arizona Department of Health Services and has prioritized homeless families residing in homeless shelters above all others when funding becomes limited; these families are not subject to the waiting list. *Providers give homeless families additional time as needed to comply with immunization requirements.*

does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?
3.3 Protection for Working Families

3.3.1 12-Month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state’s income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. 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 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

a) Describe the Lead Agency’s policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity. The eligibility determination is made no more than once a year. Once a client is determined eligible, the client is eligible for a period of 12 months. When a client or other responsible person experiences a loss of an eligible activity, a Temporary Cessation of Eligible Activity is applied for a period of 3 full-calendar months or through the end of the 12-month eligibility period, whichever occurs sooner. This process is in place to promote continuity of care for children and families while the client engages in job search or resumes an eligible activity after a temporary break.

b) How does the Lead Agency define “temporary change?” Means a loss of an eligible activity that last less than three months. During the temporary change, the client will continue to receive the same level of Child Care Assistance the client was receiving prior to the loss of an eligible activity.

Provide the citation for this policy and/or procedure. CCA 2-13-01. Fee Level and Copayment Assignment, CCA 2-14-01. Authorization of Child Care Assistance, CCA 2-16-01. Change Reporting Requirements, CCA 2-16-01-01. Temporary Cessation of Eligible Activity for Jobs Child Care Program at Cash Closure, CCA 2-16-01-02. Temporary
3.3.2 Lead Agency’s option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to 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, 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 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.

Does the Lead Agency discontinue assistance during the 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 allow this option to 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. *The eligibility for Child Care Assistance must be terminated after the end of continued Child Care Assistance under Temporary Cessation of Eligible Activities when the client does not have an eligible need, and is not engaged in an eligible activity.*


iii. How long the job-search period is (must be at least 3 months)? *Three full-calendar months or until the end of eligibility period.*

Cessation of Eligible Activity, CCA 2-16-01-V01. Temporary Cessation of Eligible Activity Flowchart

The Lead Agency may discontinue assistance prior to the next 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 12-month redetermination. Check all that apply.

☐ Not applicable
☒ 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.
  i. Define the number of unexplained absences identified as excessive: Excessive Unexplained Absences are established when the client cannot be located by phone or mail after multiple attempts, and the client has not utilized the authorized child care provider for a period of 15 consecutive days or more without any notification to an Eligibility Specialist or to the child care provider.
  ii. Provide the citation for this policy or procedure: CCA 2-11-01. Child Care Assistance Approval, Denial, and Termination
☒ A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: CCA 2-11-01. Child Care Assistance Approval, Denial, and Termination
☒ 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. CCA 2-22-01. Intentional Program Violation Intentional Program Violation is defined as an intentional act or omission, for the purpose of establishing or maintaining eligibility for Child Care Assistance, or for increasing or preventing a reduction in assistance, or for decreasing assigned copayments, and which is: 1. An act or omission that misrepresents, conceals, or withholds a material fact, or furthers a falsehood; or 2. A failure to repeatedly or substantially comply with the rules regarding Child Care Assistance eligibility.

3.3.3 Change reporting during the 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 (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(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 3.3.2 of the Plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the Plan) in work, training or educational activities (otherwise known as a parent’s eligible activity).

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

☐ No
☒ Yes

a) 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 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.

☒ Additional changes that may impact a family’s eligibility during the 12-month period. Describe: Changes in income, eligible activities, and household composition.
☒ Changes that impact the Lead Agency’s ability to contact the family. Describe: Changes in residential address and mailing address.
☒ Changes that impact the Lead Agency’s ability to pay child care providers. Describe: Changes in child care providers.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an 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.

☒ Phone
☒ Email
☐ Online forms
☐ Extended submission hours
☒ Postal Mail
☒ Fax
☒ In-person submission
☐ Other. Describe: Click or tap here to enter text.

d) Families must have the option to voluntarily report changes on an ongoing basis during the 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. N/A  
ii. Provide the citation for this policy or procedure. N/A

3.3.4 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.

☒ Advance notice to parents of pending redetermination  
☒ Advance notice to providers of pending redetermination  
☐ Pre-populated subsidy renewal form  
☐ Online documentation submission  
☐ Cross-program redeterminations  
☐ Extended office hours (evenings and/or weekends)  
☐ Other:  

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

☒ Postal Mail  
☒ Email
3.4 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. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining co-payments (98.45(k)(2)).

*Note:* To help families transition off child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies *only* to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

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

a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).
<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than $0)</td>
<td>What Is the Monthly Co-Payment in Column (b) is What Percentage of the Income in Column (a)?</td>
<td>Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?</td>
<td>The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>$1.00</td>
<td>$23 / $11.50*</td>
<td>Varies</td>
<td>$1659</td>
<td>$69 / $34.50*</td>
<td>Varies</td>
</tr>
<tr>
<td>2</td>
<td>$1.00</td>
<td>$23 / $11.50*</td>
<td>Varies</td>
<td>$2235</td>
<td>$69 / $34.50*</td>
<td>Varies</td>
</tr>
<tr>
<td>3</td>
<td>$1.00</td>
<td>$23 / $11.50*</td>
<td>Varies</td>
<td>$2809</td>
<td>$69 / $34.50*</td>
<td>Varies</td>
</tr>
<tr>
<td>4</td>
<td>$1.00</td>
<td>$23 / $11.50*</td>
<td>Varies</td>
<td>$3383</td>
<td>$69 / $34.50*</td>
<td>Varies</td>
</tr>
<tr>
<td>5</td>
<td>$1.00</td>
<td>$23 / $11.50*</td>
<td>Varies</td>
<td>$3959</td>
<td>$69 / $34.50*</td>
<td>Varies</td>
</tr>
</tbody>
</table>

b) What is the effective date of the sliding-fee scale(s)? October 1, 2017

c) Identify the most populous area of the state used to complete the chart above.
   Statewide data


If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)). The copay is displayed as Full Day / Part Day. DES charges copay per day when the client utilizes child care; therefore, the amount fluctuates depending on the usage. The numbers displayed are based on 23 Full Days and 23 Part Days.

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

- ☒ The fee is a dollar amount and:
  - ☒ The fee is per child, with the same fee for each child.
  - ☐ The fee is per child and is discounted for two or more children.
  - ☐ The fee is per child up to a maximum per family.
  - ☒ No additional fee is charged after certain number of children.
  - ☐ The fee is per family.
  - ☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: [ ]
☒ Other. Describe: The fee is per full day or per part day.

☐ The fee is a percent of income and:
☐ The fee is per child, with the same percentage applied for each child.
☐ The fee is per child, and a discounted percentage is applied for two or more children.
☐ The fee is per child up to a maximum per family.
☐ No additional percentage is charged after certain number of children.
☐ The fee is per family.
☐ The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: 
☐ Other. Describe: 

3.4.3 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 co-payments (98.45(k)(2)).

☒ No
☐ Yes. If yes, check and describe those additional factors below.
☐ Number of hours the child is in care. Describe: 
☐ Lower co-payments for a higher quality of care, as defined by the state/territory. Describe: 
☐ Other. Describe: 

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, 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 for families with an income at or below the Federal poverty level for families of the same size.
☒ Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility. Describe the policy and provide the policy citation. The Lead Agency does not assign a minimum required copayment to children referred by the Arizona Department of Child Safety or Tribal Child Protective Services. CCA 2-13-01. Fee Level and Copayment Assignment.
☒ Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency. Describe the policy and provide the policy citation. The Lead Agency does not assign a minimum required copayment to Jobs Program participants and Cash Assistance participants who need Child Care Assistance for employment. CCA 2-13-01. Fee Level and Copayment Assignment.
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. 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.

4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her 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 his or her 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)). Parents are informed of the process of receiving a child care certificate via the following:
- Consumer education materials (flyers, forms, and brochures);
- The CCDF Lead Agency website at: https://des.az.gov/services/basic-needs/child-care-home;
- First Things First website has a link to the CCDF Lead Agency on the Quality First website;
- Verbal communication at the time of application;
- Referral to the Child Care Resource and Referral (CCR&R) service; and
- The CCR&R website at: www.azchildcare.org

4.1.2 Describe how the parent is informed that the child 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.
Certificate that provides information about the choice of providers
☐ Certificate that provides information about the quality of providers
☐ Certificate not linked to a specific provider, so parents can choose any provider
☒ Consumer education materials on choosing child care
☒ Referral to child care resource and referral agencies
☐ Co-located resource and referral in eligibility offices
☒ Verbal communication at the time of the application
☐ Community outreach, workshops, or other in-person activities
☐ Other. Describe: 

4.1.3 Child care services available through grants or contracts.

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

☒ No. If no, skip to 4.1.4.
☐ 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 type(s) of child care services available through grants or contracts: 
  iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers): 
  iv. The process for accessing grants or contracts: 
  v. How rates for contracted slots are set through grants and contracts: 
  vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality: 
  vii. If contracts are offered statewide and/or locally: 

b) Will the Lead Agency use grants or contracts for child care services to increase the supply of specific types of care? Check all that apply.

☐ Programs to serve children with disabilities
☐ Programs to serve infants and toddlers
☐ Programs to serve school-age children
☐ Programs to serve children needing non-traditional hour care
☒ Programs to serve children experiencing homelessness
☐ Programs to serve children in underserved areas
☐ Programs that serve children with diverse linguistic or cultural backgrounds
☐ Programs that serve specific geographic areas
  ☐ Urban
  ☐ Rural
  ☐ Other

cision [c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

☐ Programs to serve children with disabilities
☐ Programs to serve infants and toddlers
☐ Programs to serve school-age children
☐ Programs to serve children needing non-traditional hour care
☒ Programs to serve children experiencing homelessness
☐ Programs to serve children in underserved areas
☐ Programs that serve children with diverse linguistic or cultural backgrounds
☐ Programs that serve specific geographic areas
  ☐ Urban
  ☐ Rural
  ☐ Other

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)). All child care providers must have a Registration Agreement with the DES in order to facilitate payment to that provider. By signing the Registration Agreement, the provider agrees to allow access by parents, guardians, or their authorized representatives to all areas of the facility where child care is provided at any time during the provider’s hours of operation and whenever the children are in the care of the provider. Additionally, in the State statute and rule governing the health and safety of child care centers and group homes, ADHS requires facilities to allow parents, guardians, or authorized representatives to have immediate access.

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

☒ Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: A certified in-home provider must be at least 18 years of age.)
☐ Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: ______
☐ Restricted to care by relatives. Describe: ______
☐ Restricted to care for children with special needs or a medical condition. Describe: ______
☐ Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: ______
☐ Other. Describe: ______

4.2 Assessing Market Rates and Child Care Costs

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 child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost 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 child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note: Any Lead Agency considering using an alternative methodology, instead of a market 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 market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency’s proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.
- Describe how the Lead Agency will consult with the State’s Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.
- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care—such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
• Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
• Describe how the alternative methodology will use current, up-to-date data.
• Describe the estimated reporting burden and cost to conduct the approach.

4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.

☒ MRS
☐ Alternative methodology. Describe: 
☐ Both. Describe:

4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) 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)).

Describe how the Lead Agency consulted with the:

State Advisory Council or similar coordinating body: The Arizona Early Childhood and Development Health Board (First Things First) has been designated as the State Advisory Council. DES has been designated through State statute as a mandatory member of the First Things First Board. Also, the Chief Program Officer for First Things First sits on the CCDF Lead Agency’s Child Care Advisory Committee. The Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. For issues related to ongoing service delivery, including coordination of the market rate survey, DES meets with First Things First as necessary. The Child Care Advisory Committee includes individuals that represent statewide organizations with local affiliations, Tribes, cities, and councils of governments that administer federal early childhood services.

Local child care program administrators: The Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. For issues related to ongoing service delivery, including coordination of the market rate survey. The Child Care Advisory Committee includes individuals that represent statewide organizations with local affiliations, Providers, Child Care Resource and Referral, Tribes, cities, and councils of governments that administer federal early childhood services.

Local child care resource and referral agencies: The Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. For issues related to ongoing service delivery, including coordination of the market rate survey. The Child Care Advisory Committee includes individuals that represent statewide organizations with local affiliations, Providers, Child Care Resource and Referral, Tribes, cities, and councils of governments that administer federal early childhood services.

Organizations representing caregivers, teachers, and directors: The Child Care Advisory Committee is the primary vehicle for coordinating with representatives of general-purpose local government. For issues related to ongoing service delivery, including coordination of the market rate survey. The Child Care Advisory Committee includes individuals that represent statewide organizations with local affiliations, Providers, Child
Care Resource and Referral, Tribes, cities, and councils of governments that administer federal early childhood services.

Other. Describe:

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods. The CCDF Lead Agency has designated six sub-state areas, or Districts. Each District represents a county or group of counties. DES utilizes these Districts for planning, service delivery and in conducting its field operations. Each District is an area with unique needs based upon geographic proximity or other common characteristics. They are also similar to those used by the Arizona Council of Governments. The following counties define these Districts:

District I - Maricopa
District II - Pima
District III - Apache, Coconino, Navajo & Yavapai
District IV - La Paz, Mohave & Yuma
District V - Gila & Pinal
District VI - Cochise, Graham, Greenlee & Santa Cruz

The CCDF Lead Agency contracted with Burns & Associates to conduct the Child Care Market Rate Survey (survey). Due to the complexity of the survey, to help ensure that the most accurate data was obtained and to attain a high response rate a telephone survey methodology was used. Interviewers read a questionnaire and responses were entered into a data base. This method of surveying allowed for the collection of necessary data as reported by providers and corresponded with the need to gather complex rate information by age categories and by category of care. The survey was conducted in both English and Spanish. Consistent with past surveys, all identifiable providers were surveyed rather than selecting a random sample. The basis for this approach is because a complete census is more reliable than a sample as there is no chance of a sampling error. Additionally, in some areas of the State, obtaining a sufficiently large and representative sample is not possible. Sources of provider names and telephone numbers which were utilized included:

- The CCDF Lead Agency database of certified family homes that provide child care services to families eligible for child care assistance;
- The Department of Health Services’ database of licensed child care centers (including “preschools” required to be licensed as child day care centers) and certified child care group homes;
- Listings obtained from non-profit sponsors who approve child care homes to participate in the Arizona Department of Education’s federal Child and Adult Care Food Program (CACFP); and
- Lists of otherwise unregulated homes registered with the State contracted Child Care Resource and Referral (CCR&R) services agency.

Providers that were listed on more than one list, not providing care, not charging for their services, or were unable to be interviewed due to invalid and nonexistent telephone numbers were eliminated from the survey. The survey was conducted between March and June 2018. As with any survey, there is a margin of error due to reasons such as the respondents’ interpretations of the questions asked, their understanding of the purpose of
the survey and resultant usage of the data compiled. At the onset of each telephone interview, providers were advised that specific individual information would be kept confidential and would not be used for any purpose other than identifying local market information. Individual providers were given a telephone number, which they could use to call the surveyor back if necessary.

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

Geographic area (e.g., statewide or local markets). Describe: All available child care providers in all six Districts of the State were surveyed; data has been compiled according to Arizona’s six Districts.

Type of provider. Describe: All provider types within the six Districts of the State were surveyed; data has been compiled according to provider type within Arizona’s six Districts.

Age of child. Describe: Market rate survey data addressed the rates charged by provider type within each of Arizona’s six Districts for the four following age ranges of the child:

• Children under one;
• One and two year olds;
• Three, four, and five year olds; and,
• School age children.

d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level. Additional key variations examined by the survey include:

• Whether there is a discount for a second child; or
• Whether late night, all night, weekend care, or extended care are provided.

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated 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, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance 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.

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

Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 6/30/2018
Date the report containing results was made widely available—no later than 30 days after the completion of the report. **7/7/2018**

Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. The 2018 Market Rate Survey was posted on the DES website/CCA landing page at: [https://des.az.gov/documents-center?qt-content-tab=1](https://des.az.gov/documents-center?qt-content-tab=1).

b) Describe how the Lead Agency considered stakeholder views and comments in the detailed report. **Stakeholders are provided an email address in which all comments and views are read and responded to if needed daily. Additionally, Burns and Associates will address any questions if needed.**

c) **4.3 Setting Payment Rates**

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, 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 funds. 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) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. 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. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

a) Infant (6 months), full-time licensed center care in the most populous geographic region

   Rate **$30.20 per day** unit of time (e.g. daily, weekly, monthly)

   Percentile of most recent MRS: **7%**

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

   Rate **$24.00 per day** unit of time (e.g. daily, weekly, monthly)

   Percentile of most recent MRS: **14%**

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

   Rate **$26.60 per day** unit of time (e.g. daily, weekly, monthly)

   Percentile of most recent MRS: **5%**

d) Toddler (18 months), full-time licensed FCC home in the most populous geographic region

   Rate **$26.60 per day** unit of time (e.g. daily, weekly, monthly)

   Percentile of most recent MRS: **5%**
Rate $22.00 per day unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: 12%
Preschooler (4 years), full-time licensed center care in the most populous geographic region
Rate $23.80 per day unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: 6%

Preschooler (4 years), full-time licensed FCC home in the most populous geographic region
Rate $20.00 per day unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: 10%

School-age child (6 years), full-time licensed center care in most populous geographic region
Rate $23.40 per day unit of time (e.g. daily, weekly, monthly, etc.)
Percentile of most recent MRS: 26%

School-age child (6 years), full-time licensed FCC home in the most populous geographic region
Rate $18.00 per day unit of time (e.g. daily, weekly, monthly)
Percentile of most recent MRS: 18%

Describe how part-time and full-time care were defined and calculated. Full time is six hours or more per day.

Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS as reported in 4.2.5). 7/1/2018

Identify the most populous area of the state used to complete the responses above. District 1

Provide the citation or link, if available, to the payment rates.

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)).

4.3.2 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).

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

☐ Differential rate for non-traditional hours. Describe:
☒ Differential rate for children with special needs, as defined by the state/territory. Describe: An enhanced child care rate is paid to selected quality identified programs that serve children with special child care needs. These programs may provide additional staffing, materials, equipment, curriculum, schedules, environments, family involvement, and program evaluation that ensure each child’s capabilities and needs are met.

☐ 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: 

☐ 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: 

☒ Differential rate for higher quality, as defined by the state/territory. Describe: In anticipation of the enactment of Laws 2018, Chapter 156 (HB2449) requiring that 33 percent of the quality portion of the grant be spent on tiered reimbursement DES proactively addressed tiered reimbursement. As of April 1, 2018, DES increased reimbursement to First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers. A 4-star certified provider now receives a 10 percent incentive and a 5-star certified or nationally accredited provider now receives a 20 percent incentive. These incentives help to ensure that families have access to safe, educational care with qualified staff.

☐ Other differential rates or tiered rates. Describe: 

☐ Tiered or differential rates are not implemented.

4.4 Summary of Facts Used to Determine That Payment Rates Are Sufficient to Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices. The majority of licensed centers and group homes statewide have Registration Agreements with DES to accept CCDF eligible families. Thus, eligible families have access to all provider types on a statewide basis. Currently, of all children receiving CCDF child care through the Lead Agency: 90 percent receive care in licensed child care centers; three percent receive care in certified group homes; two percent receive care in certified small family child care homes; and four percent receive care that is provided by unregulated relative providers.

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. Arizona payment rates for child care services are not currently based upon the most recent market rate survey that was completed this year. Current payment rates are set at the 75th percentile of the 2000 Market Rate Survey. Arizona has established individual maximum payment rates for a full range of providers (i.e., center, group home and home based care) and families have
access to and a choice of this range of child care providers. These rates further differenitiate among ages of children in care, full and part day care and care provide in different geographic regions resulting in 144 unique maximum payment rates.

Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF. While payment rates are not based on the current MRS at this time, Arizona reviews access to care annually to ensure equality. Arizona will continue to actively and diligently review rates examining both the fiscal and programmatic implications. We remain committed to taking the necessary steps to ensure equal access to care in current and future years.

c) Describe how the Lead Agency took the cost of higher quality 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, pre-K standards, Head Start performance standards, or State defined quality measures). In anticipation of the enactment of Laws 2018, Chapter 156 (HB2449) requiring that 33 percent of the quality portion of the grant be spent on tiered reimbursement DES proactively addressed tiered reimbursement. As of April 1, 2018, DES increased reimbursement to First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers. A 4-star certified provider now receives a 10 percent incentive and a 5-star certified or nationally accredited provider now receives a 20 percent incentive. These incentives help to ensure that families have access to safe, educational care with qualified staff. DES adopted the State Board of Education’s approved list of center-based accreditation bodies used for the Arizona Department of Education, At-Risk Preschool programs. These include: Association for Christian Schools International (ACSI), American Montessori International (AMI), American Montessori Society (AMS), National Accreditation Commission for Early Care & Education Programs (NAC), National Association for the Education of Young Children, Academy for Early Childhood Program Accreditation (NAEYC), National Early Childhood Program Accreditation (NECPA), The Department, in consultation with the Child Care Advisory Committee, adopted additional standards that are more specific to home based programs and school age. They include the following: National Association for Family Child Care (NAFCC), National Child Development Associate Credential (CDA) with a specialization in home providers, Council on Accreditation Afterschool (COAA) (formerly National After School Association).

d) 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 funds (98.16 (k))? Check all that apply.

☑ Limit the maximum co-payment per family. Describe: If the client is eligible for Transitional Child Care who transitioned out from participating in the TANF program, the Lead Agency does not assign a copayment beyond the third child. CCA 2-13-01.

☐ 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 describe.

☑ 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 3.1.7. Describe: A graduated phase-out period provides three months of child care...
assistance authorized when a family’s gross monthly income exceeds 165 percent of the Federal Poverty Level but is at or below 85 percent of the State Median Income at the time of redetermination. The period allows a family to continue accessing three months of child care assistance to help them transitioning off from the program without unnecessary disruption as they increase their household income. CCA 2-17-01.

☐ Other. Describe: __________

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. Arizona cannot regulate the rates providers charge subsidized 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. Arizona does not collect information on payments made directly to the provider.

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. Current payment rates are set at the 75th percentile of the 2000 Market Rate Survey. Arizona has established individual maximum payment rates for a full range of providers (i.e., center, group home and home based care). Families have the choice of selecting a provider that charges above the established maximum payment rate, however, the parent is responsible for paying the difference for the additional amount charged by the provider.

Describe how Lead Agencies’ payment practices described in 4.5 support equal access to a range of providers. The Lead Agency enters into Agreements with child care providers who serve families receiving CCDF subsidy. The Agreement outlines written payment agreements including information on payment policies, rates, schedules and the dispute-resolution process.

Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
Geographic area. Describe: Six Districts in the State: 1) Maricopa; 2) Pima; 3) Apache, Coconino, Navajo, and Yavapai; 4) La Paz, Mohave, and Yuma; 5) Gila and Pinal; 6) Cochise, Graham, Greenlee, and Santa Cruz.

Type of provider. Describe: Four provider types: 1) Certified Group Homes; 2) Certified group homes; 3) In-home care; and 4) Noncertified relative providers.

Age of child. Describe: Rates vary depending on the following age ranges: 1) Child under one; 2) One to two years old; 3) Three to five years old; and 4) School Age Children.

Quality level. Describe: Tiered reimbursement for recognized quality levels: First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers.

Other. Describe: Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

- Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS. Describe:
- Based on the approved alternative methodology, payment rates ensure equal access. Describe:
- Feedback from parents, including parent surveys or parental complaints. Describe:
- Other. Describe:

4.5 Payment Practices and the 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)).

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); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

a) ☐ Paying prospectively prior to the delivery of services. Describe the policy or procedure.

☒ Paying within no more than 21 calendar days of the receipt of a complete invoice for services. Describe the policy or procedure. Written in program policy and provider contracts that payments will be made within 21 days.

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):

b) ☐ Paying based on a child’s enrollment rather than attendance. Describe the policy or procedure.

☐ Providing full payment if a child attends at least 85 percent of the authorized time. Describe the policy or procedure.

☐ Providing full payment if a child is absent for five or fewer days in a month. Describe the policy or procedure.

☒ 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. If a provider has a policy to collect money for absences from non-subsidized children, Arizona will pay for up to two paid absence days per month per child.

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). CCDF funded child care services are authorized on a full and part day basis (six or more hours of care constitutes a full day and less than six hours is a part day). The service authorization amount has been standardized at 23 full and part day units per month. Providers can bill for the actual number of full and part days utilized per child per month plus up to two paid absences.
ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure.

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, and the dispute-resolution process. Describe: DES enters into agreements with child care providers who serve families who receive CCDF subsidy. The Agreement covers written payment agreements including information on payment policies, including rates, schedules and dispute-resolution process.

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: Automated notices are generated to the CCDF authorized provider immediately whenever a change is made in the automated system regarding the amount of service authorized, fee level/co-payment, or the start or stop of service for each individual child. Negative changes which affect the family or provider cannot be made retroactively; 10 days' advance notice is required prior to the effective date of any negative action. Certain negative actions (e.g., fee level/copayment increases or service authorization amount decreases) can only be made on the first of the following month, after receipt of a 10-day negative action notice.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: Payment inaccuracies due to keying errors take top priority and are handled by the Payment Processing Unit Supervisor within one business day of discovering the error. When a payment dispute arises, the Certification Unit (for Certified Homes) and the Contracts Unit (for Contracted Group Homes or Centers) are responsible for resolving the dispute or appeal. The assigned Contract Administrator or Certification Worker will work with the provider to ensure all monies due to the provider are paid timely.

g) Other. Describe: 

4.5.2 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: 

4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for 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. Lead Agencies are also required to identify shortages in the supply of high-quality providers (658 E(c)(2)(M); 98.16 (x)).

4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.
☒ In licensed family child care. **DES utilizes a GIS mapping system that allows a visual display of demand and provider type in all areas of the State. The State strategically recruits in areas that are identified as lacking quality child care.**

☒ In licensed child care centers. **DES utilizes a GIS mapping system that allows a visual display of demand and provider type in all areas of the State. The State strategically recruits in areas that are identified as lacking quality child care.**

☐ Other.  

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

**Children in underserved areas.** Check and describe all that apply.

☐ Grants and contracts (as discussed in 4.1.3). Describe:  

☐ Family child care networks. Describe:  

a) ☒ Start-up funding. Describe: **Startup funding for Certified Family child care providers is offered through the Lead Agency.**

☒ Technical assistance support. Describe: **Technical Assistance (TA) for Certified Family child care providers is offered through the Lead Agency.**

☒ Recruitment of providers. Describe: **The Lead Agency utilizes a GIS mapping system that allows a visual display of demand and provider type in all areas of the State. The State strategically recruits in areas that are identified as lacking quality child care.**

☒ Tiered payment rates (as discussed in 4.3.2). Describe: **Tiered reimbursement for recognized quality levels: First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers.**

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

☒ Accreditation supports. Describe: **The Lead Agency contracts to provide support and TA to child care providers seeking accreditation.**

☐ Child care health consultation. Describe:  

☐ Mental health consultation. Describe  

b) ☐ Other. Describe  

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

☐ Grants and contracts (as discussed in 4.1.3). Describe:  

☐ Family child care networks. Describe:  

☒ Start-up funding. Describe: **Startup funding for Certified Family child care providers is offered through DES.**

☒ Technical assistance support. Describe: **TA for Certified Family child care providers is offered through DES.**

☐ Recruitment of providers. Describe:  

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Tiered payment rates (as discussed in 4.3.2). Describe: Tiered reimbursement for recognized quality levels: First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers.

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

Accreditation supports. Describe: The Lead Agency contracts to provide support and TA to child care providers seeking accreditation.

Child care health consultation. Describe:

Mental health consultation. Describe:

Other. Describe:

Children with disabilities. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3). Describe:

Family child care networks. Describe:

Start-up funding. Describe:

Technical assistance support. Describe: TA for Certified Family child care providers is offered through DES.

Recruitment of providers. Describe:

Tiered payment rates (as discussed in 4.3.2). Describe: Tiered reimbursement for recognized quality levels: First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers.

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

Accreditation supports. Describe: The Lead Agency contracts to provide support and technical assistance to child care providers seeking accreditation.

Child care health consultation. Describe:

Mental health consultation. Describe:

Other. Describe:

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

Grants and contracts (as discussed in 4.1.3). Describe:

Family child care networks. Describe:

Start-up funding. Describe:

Technical assistance support. Describe: TA for Certified Family child care providers is offered through the lead agency.

Recruitment of providers. Describe:

Tiered payment rates (as discussed in 4.3.2). Describe: Tiered reimbursement for recognized quality levels: First Things First (FTF) Quality First 4-star, 5-star and nationally certified child care providers.
Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: [ ]

Accreditation supports. Describe: [ ] The Lead Agency contracts to provide support and technical assistance to child care providers seeking accreditation.

Child care health consultation. Describe: [ ]
Mental health consultation. Describe: [ ]
Other. Describe: [ ]

Other. Check and describe all that apply:
Grants and contracts (as discussed in 4.1.3). Describe: [ ]
Family child care networks. Describe: [ ]
Start-up funding. Describe: [ ]
Technical assistance support. Describe: [ ]
Recruitment of providers. Describe: [ ]
Tiered payment rates (as discussed in 4.3.2). Describe: [ ]
Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: [ ]
Accreditation supports. Describe: [ ]
Child care health consultation. Describe: [ ]
Mental health consultation. Describe: [ ]
Other. Describe: [ ]

4.6.3 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.

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment? DES uses Geographic Information Systems (GIS) mapping.

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. DES uses GIS mapping to determine where the concentrations of high-quality (Quality First three through five star providers as well as nationally accredited providers) are located; GIS mapping of where the CCDF authorized children reside, and also where high concentrations of poverty and unemployment are within the State. This information is used in assisting the DES in prioritizing and directing investments to children and families from areas with high concentrations of poverty and unemployment that do not have access to high-quality programs.

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 providers of child care in a state or territory and then moves to focus on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

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 are in effect for all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

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 all that apply and provide a citation to the licensing rule.
Center-based child care. Describe and provide the citation: Arizona Administrative Code A.A.C. Title 9 Chapter 5 Articles 1-6.

Family child care. Describe and provide the citation: A.A.C. Title 9 Chapter 3 Article 1-5.

In-home care (care in the child’s own home). Describe and provide the citation (if applicable): A.A.C. Title 9 Chapter 3 Article 1-5.

5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. The CCDF Lead Agency maintains the responsibility for the certification of small family child care homes (including in-home care) as well as oversight for unregulated non-certified relative providers. The CCDF Lead Agency certification requirements for small family child care homes (including in-home care) serve as the CCDF health and safety requirements for these categories of providers.

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? 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.

Center-based child care. If checked, describe the exemptions. Child care centers, group homes, and family child care homes based on military bases or Tribal land would be considered outside of the State of Arizona. Such facilities would be required to meet any applicable Tribal or military requirements and may be eligible to receive CCDF child care subsidies.

Family child care. If checked, describe the exemptions. Certified Family Child Care Homes are certified and monitored by the CCDF Lead Agency. Certified homes may care for no more than four children at one time for compensation in the provider’s home. The provider may serve families that receive CCDF child care assistance.

In-home care. If checked, describe the exemptions. Certified In-Home Providers are certified and monitored by the CCDF Lead Agency. These providers may care for no more than five children in a sibling group at one time for compensation in the child’s home. The provider may serve families that receive CCDF child care assistance.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish 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.
Licensed CCDF center-based care

1. Infant
   • How does the State/territory define infant (age range): A child 12 months of age or younger, or a child 18 months of age or younger who is not yet walking.
   • Ratio: 1:5
   • Group size: 2:11
   a) Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-5-401 specifies teacher-caregiver qualifications as listed below: The licensee shall ensure that staff members meet the following qualifications for employment or volunteer service at a facility: A teacher-caregiver is 18 years of age or older and provides the licensee with documentation of one of the following: Six months of child care experience; and A high school diploma or high school equivalency diploma; or At least 12 credit hours from an accredited college or university, including at least six credit hours in early childhood, child development, or a closely-related field; Associate or bachelor degree from an accredited college or university in early childhood, child development, or a closely-related field; or N.A.C., C.D.A., or C.C.P. credential. Additionally: any staff member who provides child care services to an infant must complete at least six additional credit hours or more on an annual basis in Infant Growth and Development, which may include Sudden Infant Death Syndrome (SIDS) prevention.

2. Toddler
   • How does the State/territory define toddler (age range): A child over 12 months of age, but younger than 36 months.
   • Ratio: Ratio of one-year-old children: 1:6
     Ratio of two-year-old children: 1:8
   • Group size: One-year-old is 12
     Two-year-old is 16.
   • Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-5-401 specifies teacher-caregiver qualifications as listed below: The licensee shall ensure that staff members meet the following qualifications for employment or volunteer service at a facility: A teacher-caregiver is 18 years of age or older and provides the licensee with documentation of one of the following: Six months of child care experience; and A high school diploma or high school equivalency diploma; or At least 12 credit hours from an accredited college or university, including at least six credit hours in early childhood, child development, or a closely-related field; Associate or bachelor degree from an accredited college or university in early childhood, child development, or a closely-related field; or N.A.C., C.D.A., or C.C.P. credential.

3. Preschool
   • How does the State/territory define preschool (age range): A child that is at least three years of age, but has not yet started school.
   • Ratio: Ratio of three-year-old children is: 1:13
     Ratio of four-year-old children is: 1:15.
     Ratio of five-year-old children is: 1:20.
- **Group size**: Three-year-old is 26, Four-year-old is 30, Five-year-old is 40.

- **Teacher/caregiver qualifications**: The Arizona Administrative Code at A.A.C. R9-5-401 specifies teacher-caregiver qualifications as listed below: The licensee shall ensure that staff members meet the following qualifications for employment or volunteer service at a facility: A teacher-caregiver is 18 years of age or older and provides the licensee with documentation of one of the following: Six months of child care experience; and A high school diploma or high school equivalency diploma; or At least 12 credit hours from an accredited college or university, including at least six credit hours in early childhood, child development, or a closely-related field; Associate or bachelor degree from an accredited college or university in early childhood, child development, or a closely-related field; or N.A.C., C.D.A., or C.C.P. credential.

4. **School-age**

- **How does the State/territory define school-age (age range)**: A child that is at least five years of age and has started school.

- **Ratio**: Ratio for school age children is 1:20.

- **Group size**: Group Size is 40.

- **Teacher/caregiver qualifications**: The Arizona Administrative Code at A.A.C. R9-5-401 specifies teacher-caregiver qualifications as listed below: The licensee shall ensure that staff members meet the following qualifications for employment or volunteer service at a facility: A teacher-caregiver is 18 years of age or older and provides the licensee with documentation of one of the following: Six months of child care experience; and A high school diploma or high school equivalency diploma; or At least 12 credit hours from an accredited college or university, including at least six credit hours in early childhood, child development, or a closely-related field; Associate or bachelor degree from an accredited college or university in early childhood, child development, or a closely-related field; or N.A.C., C.D.A., or C.C.P. credential.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. **N/A**

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups. **N/A**

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care. The Arizona Administrative Code at A.A.C. R9-5-401 specifies director qualifications as listed below: The licensee shall ensure that staff members meet the following qualifications for employment or volunteer service at a facility: A facility director is 21 years of age or older and provides the licensee with documentation of one of the following: At least 24 months of child care experience, a high school or high school equivalency diploma, and: Six credit hours or more in early childhood, child development, or a closely-related field from an accredited college or university; or At least 60 actual hours of instruction,
Licensed CCDF family child care provider

1. Infant

b) How does the State/territory define infant (age range): A child 12 months of age or younger, or a child 18 months of age or younger who is not yet walking.

   - Ratio: 1:5
   - Group size: 10
   - Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-3-301 specifies Certified Group Home Provider Responsibilities as outlined below. A certificate holder shall designate a provider who:
     1. Lives in the residence;
     2. Is 21 years of age or older;
     3. Has a high school diploma, high school equivalency diploma, associate degree, or bachelor degree;
     4. Meets one of the following:
        a. Has completed at least three credit hours in child growth and development, nutrition, psychology, or early childhood education;
        b. Has completed at least 60 hours of training in child growth and development, nutrition, psychology, early childhood education, or management of a child care business; or
        c. Has at least 12 months of child care experience; and
     5. Has completed Department-provided orientation training that includes the Department’s role in certifying and regulating child care group homes under A.R.S. Title 36, Chapter 7.1, Article 4 and A.A.C. R9-3.

2. Toddler

   - How does the State/territory define toddler (age range): A child over 12 months of age, but younger than 36 months.
   - Ratio: 1:5
   - Group size: 10
   - Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-3-301 specifies Certified Group Home Provider Responsibilities as outlined below. A certificate holder shall designate a provider who: Lives in the residence; Is 21 years of age or older; Has a high school diploma, high school equivalency diploma, associate degree, or bachelor degree; Meets one of the following: a. Has completed at least three credit hours in child growth and
development, nutrition, psychology, or early childhood education; b. Has completed at least 60 hours of training in child growth and development, nutrition, psychology, early childhood education, or management of a child care business; or c. Has at least 12 months of child care experience; and d. Has completed Department-provided orientation training that includes the Department’s role in certifying and regulating child care group homes under A.R.S. Title 36, Chapter 7.1, Article 4 and A.A.C. R9-3.

3. Preschool

- How does the State/territory define preschool (age range): A child that is at least three years of age, but has not yet started school.
- Ratio: 1:5
- Group size: 10
- Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-3-301 specifies Certified Group Home Provider Responsibilities as outlined below. A certificate holder shall designate a provider who:
  1. Lives in the residence;
  2. Is 21 years of age or older;
  3. Has a high school diploma, high school equivalency diploma, associate degree, or bachelor degree;
  4. Meets one of the following:
     a. Has completed at least three credit hours in child growth and development, nutrition, psychology, or early childhood education;
     b. Has completed at least 60 hours of training in child growth and development, nutrition, psychology, early childhood education, or management of a child care business; or
     c. Has at least 12 months of child care experience; and
  5. Has completed Department-provided orientation training that includes the Department’s role in certifying and regulating child care group homes under A.R.S. Title 36, Chapter 7.1, Article 4 and A.A.C. R9-3.

4. School-age

- How does the State/territory define school-age (age range): A child that is at least five years of age, and has started school.
- Ratio: 1:5
- Group size: 10
- Teacher/caregiver qualifications: The Arizona Administrative Code at A.A.C. R9-3-301 specifies Certified Group Home Provider Responsibilities as outlined below. A certificate holder shall designate a provider who:
  1. Lives in the residence;
  2. Is 21 years of age or older;
  3. Has a high school diploma, high school equivalency diploma, associate degree, or bachelor degree;
  4. Meets one of the following:
     a. Has completed at least three credit hours in child growth and development, nutrition, psychology, or early childhood education;
     b. Has completed at least 60 hours of training in child growth and development, nutrition, psychology, early childhood education, or management of a child care business; or
of a child care business; or
  c. Has at least 12 months of child care experience; and
5. Has completed Department-provided orientation training that includes the
   Department’s role in certifying and regulating child care group homes under
   A.R.S. Title 36, Chapter 7.1, Article 4 and A.A.C. R9-3.

5. If any of the responses above are different for exempt family child care homes,
   please describe which requirements apply to exempt homes. The Arizona
   Administrative Code at A.A.C. R6-5-5202 specifies that certified family child care
   providers meet the following requirements, including:
1. Be at least 18 years of age;
2. Participate in required orientation and training;
3. Cooperate with pre-certification interviews and inspections;
4. Provide at least three character references;
5. Furnish a self-statement of physical and mental health;
6. Submit to a physical or psychological examination as required by the CCDF Lead
   Agency if questionable; and
7. Submit the notarized criminal history certification form required by A.R.S. § 41-1964,
   and disclose whether they have committed any acts of child maltreatment or
   have been the subject of a DCS investigation.

In order to maintain certification, the Arizona Administrative Code at A.A.C. R6-5-5207 requires that the provider complete first aid and infant/child CPR training
within 60 days following certification and attend at least six hours of training per
year in the following:
1. The CCDF Lead Agency child care program, policies, and procedures;
2. Child health and safety, including recognition, control, and prevention of illness
   and disease;
3. Child growth and development;
4. Child abuse prevention, detection, and reporting;
5. Positive guidance and discipline;
6. Child nutrition;
7. Communication with families; family involvement;
8. Developmentally appropriate practices; and
9. Other similar subjects designed to improve the provider’s ability to provide child
   care.

In-home CCDF providers:
1. Describe the ratios. 1:6
2. Describe the group size. 6
3. Describe the maximum number of children that are allowed in the home at any one
time. AZ requires licensing if an individual care for and receives compensation for
more than four children at one time.
4. Describe if the state/territory requires related children to be included in the child-to-
provider ratio or group size. Group Size is six; if care is in the provider’s home;
   *If care is provided in the child’s home and all children are in the same sibling group
   the group size is unlimited.
5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day. Certified family child care providers may care for no more than two children under the age of one at a time, unless the children are part of a sibling group.

5.2.2 Health and safety standards for CCDF programs.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, 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 providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note – This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

a) Prevention and control of infectious diseases (including immunization)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Provider shall not permit a child to remain at the facility if the child shows signs of illness. The child cannot return until he/she does not have signs of illness for more than 24 hours. DES Certified homes must comply with state rule related to Sanitation, including hand washing practices, proper disposal of garbage and waste and sanitary arrangements during food preparation and diaper changing. DES Certified providers must comply with current immunization recommendations by the CDC for themselves, their own children under the age of 13 and all children in care.
- List all citations for these requirements, including those for licensed and license-exempt programs. A.A.C. R9-5-515 Centers; A.C.C. R-9-3-307 Homes. The citations for DES Certified Homes: A.A.C. R6-5-5211 Sanitation and A.A.C. R6-5-5219 Recod Keeping; Unusual Incidents; Immunizations and the corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Variation that exists between DES Certified Providers and ADHS Licensed providers such as the proximity of the diapering area to the sink used for hand washing before and after diapering.
- Describe any variations based on the age of the children in care. DES Certified Homes exempt children under the age of 18 months from the TB test.
- Describe if relatives are exempt from this requirement. DES exempts relative providers from this requirement.
2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) A staff member providing services to an infant place an infant to sleep on the infant's back, unless written instructions from the health care provider indicates differently. DES Certified homes must use proper equipment for sleeping purposes and comply with current crib safety standard manufacturing dates. They must implement safe sleep practices including placing a child on their back, ability to hear a child who is sleeping, responding to a child's distress signals and proper bottle feeding.

- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5K; R9-3-403-A2; For DES Certified homes the citations are A.A.C R6-5203 Initial Certification, The Home Facility, A.A.C. R6-5-5210 Safety; Supervision, A.A.C R6-5213 Evening and Nightime Care and A.A.C R6-5214 Children Younger than Age two and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. For DES Certified Homes this applies to Infants.

- Describe if relatives are exempt from this requirement. DES exempts relatives from this requirement.

3. Administration of medication, consistent with standards for parental consent

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Provider may offer administration of medication with a completed medication form including dosage/time/Rx #/ etc. For DES Certified Homes only the provider may administer medication to a child in care. Signed written instructions from the parent must be included. Prescription medication must not be expired and must include dosage, frequency and doctor's name. Each time any medication is administered the provider must record it and include the name of the child receiving the name of the medication date and time.

- List all citations for these requirements, including those for licensed and license-exempt providers. R-9-5-516; R-9-3-309 A.A.C. R6-5-5218 Health Care; Medications and A.A.C. R6-5-5219 Record Keeping; Unusual Incidents; Immunizations and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.

4. Prevention of and response to emergencies due to food and allergic reactions

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
Information/Immunization record card is completed for each child attending—giving specifics on dietary needs and allergies. For DES Certified providers if a life threatening illness or injury to a child occurs they must immediately call 911. They must keep an emergency card with health, medical and contact information for each child in care, and shall carry it when transporting a child. The card includes any known food allergies. The provider is to consult with the parent to identify in writing any special dietary needs or instructions for a child in care. A provider is also required to be certified in child and infant CPR and First Aid.

- List all citations for these requirements, including those for licensed and license-exempt providers. 
  R9-305 B8; R-9-3-3 B8 A.A.C. R6-5-5207 Manitenance of Certification; General Requirements, A.A.C. R6-5-5217 Meals and Nutrition A.A.C. R6-5-5218 Health Care; Medications and the corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the age of the children in care. N/A
- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.

5. 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

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) All licensed premises must be free from hazards and inaccessible to children. For DES Certified Homes a provider shall maintain the indoor and outdoor premises of the home facility in a safe and sanitary condition, free from hazards and in good repair. A provider shall safeguard all potentially dangerous objects from children such as sharp objects, electrical boxes and outlets, chemicals and cleaners. A provider shall use developmentally appropriate precaution to separate a child in care from hazardous areas, including locked doors and safe portable folding gates. Outside play areas shall be fenced if there are conditions that may pose a danger to any child playing outside.
- List all citations for these requirements, including those for licensed and license-exempt providers. 
  R-9-5-501; R-9-3-401 A.A.C. R6-5-5203 Initial Certification: The Home Facility and A.A.C. R6-5-5210 Safety; Supervision and the corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the age of the children in care. N/A
- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) The health, safety or welfare of an enrolled child is not placed at risk of harm. For DES Certified Homes only providers may discipline a child in care. They are required to provide a statement that includes their parenting and discipline methods and sign an acceptable discipline form. They may only practice acceptable methods of discipline such as, redirection and reinforcement and only teach acceptable behavior and promote child self-discipline. Providers are prohibited from any discipline measures that may cause any emotional or physical harm to a child.

- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-501 R9-3-401 A.A.C. R6-5-5202 Initial Application for Certification, A.A.C. R6-5-5212 Discipline, and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. For DES Relative Providers they receive an overview of proper discipline during orientation and sign the acceptable discipline forms.

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.

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) For DES Certified Homes providers are required to have an Emergency Preparedness Plan which is shared with the parent or guardian of the children in care. They must have a diagram for evacuation posted and keep a log of practice drills. The Emergency Preparedness Plan includes shelter in place and reunification instructions. List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R6-5-5203 Initial Certification: The Home Facility CMSQ-680-B-PF Ammendment 3.6 and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

- All premises including the building must be free from hazards. For DES Certified Homes, providers shall safeguard hazardous materials such as chemicals and keep them locked and out of the reach of children. Providers shall use a garbage receptacle with a close fitting lid and shall empty it at least once each day. A provider shall frequently check the diaper of each child in care and immediately change soiled diapers. Sanitary practices for both cloth and disposable diapers shall be followed including hand washing before and after each change and sanitation of surfaces. Soiled diapers shall be discarded in a tightly covered, lined container out of reach of children.

- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-501.A.12; A.A.C. R9-30401.B.2 A.A.C. R5-5203 Initial Certification: The Home Facility, A.A.C. R-5-5211 Sanitation and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.

9. Precautions in transporting children (if applicable)

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) For DES Certified Homes providers are required to obtain written permission from the parent or guardian for each child being transported either in a private vehicle or using public transportation. A provider who transports children is also required to sign the DES Transportation Agreement. For private vehicles the driver must be licensed and the insurance must meet the requirements of Arizona law. The vehicle must be mechanically safe with functioning brakes, signal and headlights, tires with tread. The car must have structural integrity. Age appropriate car seats or seat belts must be used for each child. The provider is required to bring the emergency card of each child being transported. First aid supplies must be maintained in the vehicle.

- List all citations for these requirements, including those for licensed and license-exempt providers.

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

- Describe any variations based on the age of the children in care. N/A

- Describe if relatives are exempt from this requirement. DES exempts relative homes from this requirement.

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification
• Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) One staff member must have CPR/First Aid at the center at all times and on field trips. For DES Certified Homes, provider are mandated reporters. They receive training and are required to report suspected abuse or neglect to the Arizona Department of Child Safety or local law enforcement as required by A.R.S. 13-3620. Providers are required to log any suspected concerns regarding child abuse or neglect.

• List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-301.G.1-3; R9-3-301. A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training. A.A.C. R6-5-5210. Safety; Supervision. A.A.C. R6-5-5219 Record Keeping; Unusual Incidents; Immunizations and the corresponding policies. These topics are included on the DES home inspection monitoring tools.

• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

• Describe any variations based on the age of the children in care. N/A

• Describe if relatives are exempt from this requirement. For DES Relative Providers they are also mandated reporters in accordance with A.R.S 13-3620. This is trained during their orientation.

11. Recognition and reporting of child abuse and neglect

• Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) Licensee or staff member must report any suspected, alleged child abuse to law enforcement, the Arizona Department of Child Safety and the Arizona Department of Health Services.

• List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-307-1.2.; R9-3-308-1-3; A.A.C. R6-5-5210. Safety; Supervision. A.A.C. R6-5-5219 Record Keeping; Unusual Incidents; Immunizations and the corresponding policies.

• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A

• Describe any variations based on the age of the children in care. N/A

• Describe if relatives are exempt from this requirement. For DES Relative Providers they are also mandated reporters in accordance with A.R.S 13-3620. This is trained during their orientation.

b) Does the Lead Agency include any of the following optional standards?

☐ No, if no, skip to 5.2.3.
☒ Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

• Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) ADHS requires the application/use of Child and Adult Care Food Program (CACFP) meal pattern requirements. For DES Certified Homes providers are required to serve the child in care nutritious foods and beverages consistent with state
requirements. Providers shall supplement meals and snacks supplied by a parent when the food supplied does not provide the child with a nutritious diet. Providers should satisfy the child's appetite and dietary needs and consult with the parent about any dietary needs. Certified providers participate in the ADHS Empower Program that is a set of 10 standards which promote health, nutrition, and wellness in child care facilities. Nutrition standards encourage participation in CACFP when eligible, limiting fruit juice, promoting serving family-style meals, and supporting breastfeeding in the child care environment. For ADHS centers and group homes, while participation in Empower is voluntary, over 99 percent participate in trade for a 50 percent licensing fee reduction.

- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-508.C; R9-3-406.C; A.A.C. R6-5-5217 Meals and Nutrition and corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe if relatives are exempt from this requirement. DES Relative Providers are exempt from this requirement.

2. Access to physical activity

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) For DES Certified homes the provider shall have adequate space and equipment in the dwelling for safe freedom for movement. The provider shall offer a program that is developmentally appropriate for and meets the needs of the children in care. The program shall include indoor and outdoor activities that encourage movement such as group activities, creativity, and large and small muscle development activities. The provider shall have play equipment and materials that are developmentally appropriate to encourage active play. The provider is required to post a daily schedule that includes outdoor play and shall use their own yard or a nearby park. Certified providers participate in the ADHS Empower Program that is a set of 10 standards which promote health, nutrition, and wellness in child care facilities. Nutrition standards encourage participation in CACFP when eligible, limiting fruit juice, promoting serving family-style meals, and supporting breastfeeding in the child care environment. For ADHS centers and group homes, while participation in Empower is voluntary, over 99 percent participate in trade for a 50 percent licensing fee reduction.
- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R6-5-5203 Initial Certification: The Home Facility, A.A.C. R6-5-5209 Program and Equipment and corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the ages of the children in care. N/A
- Describe if relatives are exempt from this requirement. **DES exempts relative homes from this requirement.**

3. Caring for children with special needs

- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **Defines all care, physical, medical, nutritional, and feeding equipment to include training of staff with IEP/IP For DES Certified Homes the provider shall consult with parents or guardians to establish a mutually agreed upon plan regarding care for their child with special needs. A provider is required to integrate a child with special needs into the daily activities of the home facility in a manner that is the least restrictive and meets the child's individual needs. If a child with special needs over the age of three needs diapering, the home shall have a changing area that permits the child to have privacy. A provider shall make reasonable accommodations in the home facility including equipment and materials for a child with special needs. A provider shall have the physical ability and appropriate training to provide the care required by the child.**
- List all citations for these requirements, including those for licensed and license-exempt providers. A.A.C. R9-5-507 .a-f; R9-3-404. A-C A.A.C. R6-5-5215 Children with Special Needs and corresponding policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
- Describe any variations based on the ages of the children in care. N/A
- Describe if relatives are exempt from this requirement. **DES exempts relative homes from this requirement.**

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)). Describe: **Lesson plans, schedules.**

- Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.) **Lesson plans and schedules are to include supplemental standards for all ages.**
- List all citations for these requirements, including those for licensed and license-exempt providers. AAC R9-5-504, 505, 506; R0-3-401, 403 A.A.C. R6-5-5210 Safety; Supervision and related policies. These topics are included on the DES home inspection monitoring tools.
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
- Describe any variations based on the ages of the children in care.
- Describe if relatives are exempt from this requirement. **DES exempts relative homes from this requirement.**

5.2.3 Health and safety training for CCDF providers on required topics.

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, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the
health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(j); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Pre-Service or Orientation Training Requirements

Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers: 12
2. Licensed FCC homes: 12
3. In-home care: 12
4. Variations for exempt provider settings: N/A

Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer). Within 90 days of hire or certification.

Explain any differences in pre-service or orientation training requirements based on the ages of the children served. In the orientation that is provided to all newly DES contracted providers there is an overview of the 12 hour CCDBG Health & Safety topics. These topics include age's birth through 12 years old.

Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered. CCDBG Health & Safety trainings are offered statewide face-to-face delivered in six (2) hour modules. In rural areas there is on-line option available through Quorum On-Line Learning which meets all CCDBG Health & Safety requirements.

Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

1. Prevention and control of infectious diseases (including immunizations)
   - Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
     - ☐ Yes
     - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

- Describe if relatives are exempt from this requirement. **Relative Home Providers are exempt.**

2. **Prevention of sudden infant death syndrome and the use of safe-sleep practices**

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

- Describe if relatives are exempt from this requirement. **Relative home provider are exempt.**

3. **Administration of medication, consistent with standards for parental consent**

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
No

- Describe if relatives are exempt from this requirement. **Relative home providers are exempt.**

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - Yes
  - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☐ Yes
  - ☒ No
- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - Yes
  - ☒ No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - Yes
  - ☒ No
- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
   - Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised? ☒ No
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised? ☒ No
   - Describe if relatives are exempt from this requirement. Relative Home providers are exempt.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event
   - Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised? ☒ No
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised? ☒ No
   - Describe if relatives are exempt from this requirement. Relative Home providers are exempt.

8. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants
• Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

• Describe if relatives are exempt from this requirement. Relative Home providers are exempt.

9. Appropriate precautions in transporting children (if applicable)

• Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  ☐ Yes
  ☒ No

• Describe if relatives are exempt from this requirement. Relative Home providers are exempt.

10. Pediatric first aid and CPR certification

• Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative...
Home providers, that all staff providing direct service to children are required to obtain CPR certification.

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - [ ] Yes
  - [x] No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - [ ] Yes
  - [x] No

- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**

11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. **The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.**
  - [ ] Yes
  - [x] No

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - [ ] Yes
  - [x] No

- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. **The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - [ ] Yes
  - [x] No
- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☑ No
- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**

13. Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc. **The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.**

- Provide the citation(s) for other training requirements, including citations for both licensed and license-exempt providers. **The CCDF Lead Agency has implemented a condition in the Registration Agreement for providers who receive CCDF funds regardless of licensing status with exception of Relative Home providers, that all staff providing direct service to children are required to attend the pre-service health and safety training.**
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?
  - ☑ No
- Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?
  - ☑ No
- Describe if relatives are exempt from this requirement. **Relative Home providers are exempt.**

**Ongoing Training Requirements**

a) 5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

  c) Licensed child care centers: **18**
  d) Licensed FCC homes: **12**
  d) In-home care: **12**
  
  Variations for exempt provider settings: **N/A**

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
1. Prevention and control of infectious diseases (including immunizations)

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

3. Administration of medication, consistent with standards for parental consent

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☒ Annually.

- Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☒ Annually.

- Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers; R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☒ Annually.

- Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
Child Care providers must obtain a minimum of 12 hours annually in the topics.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
• How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  □ Annually.
  ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

• How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  □ Annually.
  ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

• Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.

• How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  □ Annually.
  ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

• How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  □ Annually.
  ☑ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

10. Pediatric first aid and CPR certification

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs? ☐ Annually.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs? ☐ Annually.

11. Recognition and reporting of child abuse and neglect

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs? ☐ Annually.
- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs? ☐ Annually.
- Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.
Child Care providers must obtain a minimum of 12 hours annually in the topics.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

12. Child development (98.44(b)(1)(iii))

- Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. R9-5-403 http://apps.azsos.gov/public_services/Title_09/9-05.pdf; A.A.C. R6-5-5207 Maintenance of Certification: General Requirements; Training.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
  - ☐ Annually.
  - ☒ Other. Describe Each staff member who is employed within ADHS Group Home or Child Care Facility must obtain the minimum number of training hours and must include at least two topics annually. DES Certified Family Child Care providers must obtain a minimum of 12 hours annually in the topics.

13. Describe other requirements, such as nutrition, physical activities, caring for children with special needs, etc. Certified providers participate in the ADHS Empower Program that is a set of 10 standards which promote health, nutrition, and wellness in child care facilities. Nutrition standards encourage participation in CACFP when eligible, limiting fruit juice, promoting serving family-style meals, and supporting breastfeeding in the child care environment. For ADHS centers and group homes, while participation in Empower is voluntary, over 99 percent participate in trade for a 50 percent licensing fee reduction.
provide the citation(s) for other training requirements, including citations for both licensed and license-exempt providers.

how often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?
☐ Annually.
☐ Other. Describe

how often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in license-exempt CCDF programs?
☐ Annually.
☐ Other. Describe

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

lead agencies must certify that procedures are in effect to ensure that 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 5.3.2.

to certify, describe the procedures to ensure that CCDF providers comply with all applicable state and local health and safety requirements. 36-897.08, 36-897.06, R9-5-101.65, 36-883; The Director of ADHS has implemented rules regarding the enforcement of the standards of care, including penalties of non-compliance with these standards. Denial/revocation or suspension of a license is also available for non-compliance.

5.3.2 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)).

a) Certify by responding to the questions below to describe 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.

Licensed CCDF center-based child care
1. Describe your state/territory's requirements for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards. R9-5-202. (Time Frames) requires an inspection as part of the substantive review prior to licensing. TA is offered along with orientation for applicants to ensure they are ready for licensing.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers. As required per statute and rule, providers are inspected at least once per year. A.A.C. R9-5-206 A-B. ARS36-885

3. Identify the frequency of unannounced inspections:
   ☒ Once a year
   ☐ More than once a year. Describe Twice a year

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards. Statutes and rules require inspections at least annually and two inspections for group homes. Arizona follows some protocols of differential monitoring – monitor for health safety; monitor at least once per year and have an abbreviated check list for inspections. Assessments are made with regards to complaints, pattern of non-compliance, and enforcement actions. In addition, technical assistance, follow-up inspections, and complaint investigations.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers A.R.S. 36-883 Standards of Care rules; classifications, A.R.S 36-883.04 Standards of care; rules; enforcement. Non-compliance: A.R.S.36-885 Inspections of Child Care Facilities.

Licensed CCDF family child care home

1. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards. Statutes and rules require an inspection be conducted as part of the substantive review prior to certification. Small Group homes receive a mid-year unannounced inspection and an annual inspection. In addition, TA, follow-up inspections, complaint investigations, monitoring are also offered. AZ follows some protocols of differential monitoring – monitor for health safety; monitor at least once per year and have an abbreviated check list for inspections. Assessments are made with regards to complaints, pattern of non-compliance, and enforcement actions.

2. Describe your state/territory's requirements for at least annual, unannounced inspections of licensed CCDF family child care providers. Statute requires two inspections per year for Child Care Group Homes.

3. Identify the frequency of unannounced inspections:
   ☐ Once a year
   ☒ More than once a year. Describe Twice a year

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards. Inspections are required 2 times per year utilizing an instrument that documents compliance and non-compliance.
5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF family child care providers. A.R.S. 36-897.02.a-e, A.A.C. R9-3-102, R9-3-206.A.B

Licensed in-home CCDF child care

☒ N/A. In-home CCDF child care (care in the child’s own home) is not licensed in the state/territory. Skip to 5.3.2 (d).

1. Describe your state/territory’s requirements for pre-licensure inspections of licensed in-home child care providers for compliance with health, safety, and fire standards.

2. Describe your state/territory’s requirements for at least annual, unannounced inspections of licensed CCDF in-home child care providers.

3. Identify the frequency of unannounced inspections:
   - ☐ Once a year
   - ☐ More than once a year. Describe

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed in-home CCDF providers.

List the entity(ies) in your state/territory that is responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers. ADHS

5.3.3 Inspections for license-exempt CCDF 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)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (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. N/A

Provide the citation(s) for this policy or procedure. N/A

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. For DES Certified Homes a mimimum of two monitoring inspections are completed per year one of which is unannounced. Differential monitoring will be implemented for the unannounced inspection effective June 1, 2018.

Provide the citation(s) for this policy or procedure. A.A.C. R6-5-5207 Maintenance of Certification: General Requirements: Training.
License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used. For DES Certified In-Home providers a minimum of two monitoring inspections are completed per year one of which is unannounced. Differential monitoring is not being implemented. DES relative providers are exempt from monitoring.

c) Provide the citation(s) for this policy or procedure. A.A.C. R6-5-5207 Maintenance of Certification: General Requirements and corresponding policies.

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

☐ No
☐ Yes. If yes, describe: ____

List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers: N/A

5.3.4 Licensing inspectors.

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 State's 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 by requiring, at minimum, a Bachelor degree in early childhood or related field as well as on going annual training. Provide the citation(s) for this policy or procedure. ____

5.3.5 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. 1:99

Provide the policy citation and state/territory ratio of licensing inspectors. _____
### 5.3.6

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 inspection requirements. *Note:* This exception only applies if the individual cares *only* for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

- Yes, relatives are exempt from all inspection requirements. If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care. **The Lead Agency requires relative providers to obtain a level one fingerprint clearance card and undergo an Arizona Child Safety Welfare background check. The Lead Agency, upon contracting with relative providers, provides training on maintaining child records including immunizations, the child’s health care provider information, and health concerns such as allergies or need for medication.**

- Yes, relatives are exempt from some inspection requirements. If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care. **Relative home providers are exempt from health and safety on-site inspections.**

- No, relatives are not exempt from inspection requirements.

### 5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal 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 FCC 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)(iii)(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)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

<table>
<thead>
<tr>
<th>Components</th>
<th>In-State</th>
<th>National</th>
<th>Inter-State</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Criminal registry or repository using fingerprints in the current state of residency</strong></td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>2. <strong>Sex offender registry or repository check in the current state of residency</strong></td>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>
### Components

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<thead>
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<th>National</th>
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</tr>
</thead>
<tbody>
<tr>
<td>3. Child abuse and neglect registry and database check in the current state of residency</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. FBI fingerprint check</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)</td>
<td></td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>6. 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</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years</td>
<td>x</td>
<td></td>
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</tr>
</tbody>
</table>

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U.S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

- The national FBI fingerprint check; and,
- The three in-state background check provisions for the current state of residency:
  - state criminal registry or repository using fingerprints;
  - state sex offender registry or repository check; and
  - State-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.
<table>
<thead>
<tr>
<th>Components</th>
<th>New (Prospective) Staff</th>
<th>Existing Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Criminal registry or repository using fingerprints in the current state</td>
<td>Milestone/prerequisite for waiver</td>
<td>Possible time limited waiver for current (existing) staff</td>
</tr>
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<td>of residency</td>
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<tr>
<td>2. Sex offender registry or repository check in the current state of</td>
<td>Milestone/prerequisite for waiver</td>
<td>Possible time limited waiver for current (existing) staff</td>
</tr>
<tr>
<td>residency</td>
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<tr>
<td>3. Child abuse and neglect registry and database check in the current state</td>
<td>Milestone/prerequisite for waiver</td>
<td>Possible time limited waiver for current (existing) staff</td>
</tr>
<tr>
<td>of residency</td>
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<tr>
<td>4. FBI fingerprint check</td>
<td>Milestone/prerequisite for waiver</td>
<td>Possible time limited waiver for current (existing) staff</td>
</tr>
<tr>
<td>5. National Crime Information Center (NCIC) National Sex Offender Registry</td>
<td>Possible time limited waiver for:</td>
<td></td>
</tr>
<tr>
<td>(NSOR)</td>
<td>• establishing requirements and procedures; and/or</td>
<td></td>
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<td></td>
<td>• conducting checks on all new (prospective) staff; and/or</td>
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<td></td>
<td>• conducting checks on current (existing) staff</td>
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<tr>
<td>6. Criminal registry or repository in any other state where the individual</td>
<td>Possible time limited waiver for:</td>
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<tr>
<td>has resided in the past 5 years, with the use of fingerprints being</td>
<td>• establishing requirements and procedures; and/or</td>
<td></td>
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<tr>
<td>optional</td>
<td>• conducting checks on all new (prospective) staff; and/or</td>
<td></td>
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<td></td>
<td>• conducting checks on current (existing) staff</td>
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<tr>
<td>7. Sex offender registry or repository in any other state where the</td>
<td>Possible time limited waiver for:</td>
<td></td>
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<tr>
<td>individual has resided in the past 5 years</td>
<td>• establishing requirements and procedures; and/or</td>
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<td></td>
<td>• conducting checks on all new (prospective) staff; and/or</td>
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<td></td>
<td>Conducting checks on current (existing) staff</td>
<td></td>
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<tr>
<td>8. Child abuse and neglect registry and database in any other state where</td>
<td>Possible time limited waiver for:</td>
<td></td>
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<tr>
<td>the individual has resided in the past 5 years</td>
<td>• establishing requirements and procedures; and/or</td>
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<td></td>
<td>• conducting checks on all new (prospective) staff; and/or</td>
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<td></td>
<td>• conducting checks on current (existing) staff</td>
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</tbody>
</table>
Use the questions below to describe the status of the requirements, policies, and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

a) Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations: Currently, the State of Arizona does not require criminal background checks to be conducted on prospective child care staff.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
• Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers).
• Key challenges to fully implementing this requirement.
• Strategies used to address these challenges.
Describe: 

5.4.2 In-State Sex Offender Registry Requirements (98.43(b) (3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state sex offender registry.

a) i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. **Currently, the State of Arizona does not require a search of the In-State Sex Offender registry for prospective child care staff.**

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. **The State of Arizona searches the In-State Sex Offender Registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.**

☐ No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state sex offender registry for current (existing) child care staff including:

• Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
• Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
• Key challenges to fully implementing this requirement
• Strategies used to address these challenges
Describe: 
5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies, and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. *Currently, the State of Arizona does not require a search of the In-State Sex Offender registry for prospective child care staff.*

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. *Currently, the State of Arizona does not require a search of the In-State Sex Offender registry for prospective child care staff.*

Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. *In Arizona, individuals that provide care for children must complete a child abuse registry check per Arizona Revised Statutes 36-87.03 and 8-804 (1).*

☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note that an FBI fingerprint check satisfies the requirement to perform an interstate check of another state’s criminal history records repository if the responding state (where the child care staff member has resided
within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies, and procedures for the search of the national FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. Currently, the State of Arizona does not require a search of the National FBI Criminal fingerprint registry for prospective child care staff.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.

☐ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

a) Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff?

☐ Yes. If yes,
i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations. _____

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations.

☒ No (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: Currently, the State of Arizona does not require a search of the National Crime Information Center (NCIC) for prospective child care staff. DES is in the process of exploring methods and necessary statutory changes to complete this requirement.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

☒ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches include a search of the National Sex Offender Registry and are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.

☐ No (Waiver request allowed. See Appendix A.) Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers).
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: _____

Inter-state Background Check Requirements
Checking a potential employee’s history in any state other than that in which the provider’s services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

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 (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

☐ No. (Waiver request allowed. See Appendix A.). Describe the status of conducting the interstate criminal registry or repository check for new (prospective) child care staff including:
  • Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
  • Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  • Key challenges to fully implementing this requirement
  • Strategies used to address these challenges

Describe: **Currently, the State of Arizona does not require a search of the interstate criminal registry for prospective child care staff. DES is in the process of exploring methods and necessary statutory changes to complete this requirement.**

Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?
Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches include a search of the interstate criminal registry and are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.

No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe:

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

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) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o).

No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges
  Describe: *Currently, the State of Arizona does not require a search of the interstate sex offender registry for prospective child care staff. DES is in the process of exploring methods and necessary statutory changes to complete this requirement.*

Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

☑ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations. **The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. These checks are required by State statute. The searches include a search of the interstate sex offender registry and are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.**

☐ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:
  - Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
  - Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
  - Key challenges to fully implementing this requirement
  - Strategies used to address these challenges
  Describe: ___

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

a) Note: This is a name-based search.

Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

☐ Yes. If yes,
  i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). ___
  ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). ___

☑ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:
  - Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: Currently, the State of Arizona does not require a search of the interstate child abuse and neglect check for prospective child care staff. DES is in the process of exploring methods and necessary statutory changes to complete this requirement.

Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

☐ Yes. Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

☒ No. (Waiver request allowed. See Appendix A.) Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirement
- Strategies used to address these challenges

Describe: Currently, the State of Arizona does not require a search of the interstate child abuse and neglect check for all current existing child care staff. DES requires providers who serve CCDF children to conduct the interstate child abuse and neglect check through the child care provider contract. DES is in the process of exploring methods and necessary statutory changes to complete this requirement to include all child care providers in the State of Arizona.

Provisional Employment

The CCDF Final Rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF Final Rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional
hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below (Waiver request allowed. See Appendix A). Check all that apply.

☐ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving 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 child care staff member resides. Describe and include a citation:

☒ The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving 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 child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A). Describe and include a citation: The State of Arizona allow prospective staff members to begin work on a provisional basis after the request has been submitted but before receiving satisfactory results. The searches are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801.

☐ Other. Describe

5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)). The State of Arizona searches the criminal registry prior to the issuance of a fingerprint clearance card for existing and new child care staff. The searches are conducted by the Arizona Department of Public Safety. See: Arizona Revised Statutes 41-1758.07 and 46-801. Results from these searches are typically received within 30 days. DES is exploring options for providers to utilize electronic fingerprinting services, as results are received significantly faster, typically, within 48 hours.
5.4.11 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. 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)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

☒ No
☐ Yes. Describe other disqualifying crimes and provide citation:
5.4.12 The state/territory has a process for a child care staff member to appeal the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3). Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, 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)). In accordance with A.R.S. §§ 41-1750(A)(2) and 41-1758 et seq., the Arizona Department of Public Safety (DPS) Applicant Clearance Card Team conducts fingerprint-based criminal history record checks and exchanges the fingerprint data with the Federal Bureau of Investigation. Further, as required by A.R.S. §§ 41-1750(G)(3) & 41-1758.03(F), 41-1758.07(F), DPS releases an applicant’s criminal history record to the Arizona Board of Fingerprinting upon the Arizona Board of Fingerprinting’s request, for the purpose of conducting good cause exception hearings. Some offenses may be eligible to pursue a good cause exception through the Arizona Board of Fingerprinting. The Board of Fingerprinting is a separate state agency from DPS.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)). The State does not charge additional fees that exceed the actual costs of processing criminal background checks.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

☐ No, relatives are not exempt from background check requirements.
☐ Yes, relatives are exempt from all background check requirements.
☒ Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers. Currently, the State does not require interstate child abuse and neglect background checks on Relative home providers.

6  Recruit and Retain a Qualified and Effective Child Care Workforce

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.

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, which is 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.

Describe how the state/territory’s framework for training and professional development addresses the following required elements:

- **State/territory professional standards and competencies.** Describe: The Arizona Department of Economic Security, CCDF Lead Agency, works in collaboration with the Arizona Department of Education, the Arizona Department of Health Services, and the Arizona Early Childhood Development and Health Board (referred to in this section as First Things First, State Advisory Council) to plan and administer professional development systems and workforce initiatives that are accessible for the diversity of providers in the State.

**Arizona Department of Education**
The Arizona Department of Education – Early Childhood Education (ADE-ECE) unit has created four to six hour modules for each of Arizona’s Infant and Toddler Development Guidelines (ITDG) and for each of the Arizona Early Learning Standards (AzELS), 3rd Edition. Professional development opportunities are provided throughout the state by a team of program specialists that work with programs in the communities including school districts, Head Starts, private providers, faith-based providers, home providers and home visitors.

The Early Childhood Education unit is also working with Institutes of Higher Education to make sure that the standards and guidelines are a part of the course work in community college and university classes.

**First Things First, State Advisory Council**
The Arizona Early Childhood Career and Professional Development Network is an integrated professional development system for all Arizona early childhood
professionals working with or on behalf of young children. The Network was recently launched by First Things First, and includes the following components:

• The Professional Development (PD) website which provides the early childhood workforce access to a variety of professional development resources including competencies and standards, education pathways and opportunities, career pathways, employment opportunities, and the Arizona Early Childhood Workforce Registry.

• The Arizona Early Childhood Workforce Registry (Registry) is a web-based system that enables early childhood professionals and those interested in a career in early education to find and register for professional development opportunities and also to keep a record of their experience, education, professional development and credentials in a central location. It is also used to manage application and enrollment in First Things First College Scholarships for Early Childhood Professionals.

• The Arizona Early Childhood Workforce Knowledge and Competencies is a uniform set of expectations that identify the basic knowledge, skills, and abilities needed for early childhood professionals across sectors of early childhood including early care and education, early intervention, mental health, physical health and social services/child welfare professionals. They ensure implementation of quality services for young children and their families. All professional development opportunities offered in the Registry will be required to align with at least one of the core knowledge areas.

• The Arizona Career Lattice is a tool within the Registry that provides the pathway of education, professional development, and work experience for early childhood professionals to use for individualized assessment, setting professional development goals, and documentation of progress in career development.

• The Professional Development Instructor and TA Provider Standards define the credentials, knowledge and experience necessary to ensure high quality professional development experiences for our workforce from entry through advanced levels.

Recently launched, the Professional Development system is expected to support the early childhood workforce to access professional development aligned with the Workforce Knowledge and Competencies, which include eight Core Knowledge areas:

1. Child Growth and Development
   • Basic Child Development
   • Typical and Atypical Behavior
   • Individual Differences
   • Influences on Development
   • Facilitation of Development
   • Collaboration

2. Curriculum and Learning Environment
   • Overall Learning Environment
   • Learning Strategies
   • Curriculum
   • Schedules, Routines & Transitions
   • Physical Environment
   • Materials and Equipment
3. Child Observation and Assessment
   • Assessment Plans and Procedures
   • Assessment Uses
   • Assessment Related to Special Needs
   • Communication with Families
   • Confidentiality

4. Effective Interactions
   • Relationships
   • Interactions for Learning
   • Group Interactions
   • Communication
   • Guidance
   • Interactions with Families

5. Health, Safety, and Nutrition
   • Policies, Practices and Procedures
   • Abuse and Neglect
   • Nutrition & Dietary Practices
   • Communication with Families
   • Health Education

6. Family and Community Partnerships
   • Knowing and Respecting Families
   • Communication
   • Community Collaborations
   • Encouraging Families to be Advocates for their Children

7. Professionalism
   • Commitment to Quality
   • Professional Development
   • Ethics
   • Leadership

8. Program Management
   • Legal and Regulatory Standards
   • Physical Facility
   • Fiscal Management
   • Risk Management Plan
   • Technology
   • Human Resource Management
   • Program Planning and Evaluation

   a) The Workforce Knowledge and Competencies provide a framework for describing early childhood workforce competencies through the use of levels from beginning to advanced levels of skills, knowledge and abilities.
   b) First Things First is the State Advisory Council and convenes the Professional Development Work Group that supports the development and
enhancement of the Professional Development System in Arizona. Department of Economic Security Child Care Administration staff participate on this work group.
c) The Workforce Knowledge and Competencies are aligned with the state’s Early Learning Standards and Infant Toddler Developmental Guidelines.
d) All Professional Development System components, including competencies and standards are accessible to all of the early childhood workforce, including Tribal organizations.
e) The Professional Development System components were developed with the intent to ensure the workforces has the ability to serve all families and children.

**Arizona Department of Economic Security, CCDF Lead Agency**
- Contracts with a variety of organizations to provide training and TA to the child care workforce. Contracts through the Lead Agency include Expulsion Prevention, Infant and Toddler training specific, CCDBG Topic training, and Health and Safety training. In addition, child care providers receive assistance with the cost of the tuition and textbooks for Early Childhood certificate, CDA, or associate's degree through an agreement with Central Arizona College.

- Career pathways. Describe: The Arizona Career Lattice is a tool within the Arizona Early Childhood Workforce Registry (Registry) that provides the pathway of education, professional development, and work experience for early childhood professionals to use for individualized assessment, setting professional development goals, and documentation of progress in career development.

- Advisory structure. Describe: First Things First continues to lead, convene, and staff the Professional Development Workgroup, comprised of key cross-sector stakeholders including faculty from Arizona’s institutes of higher education, First Things First Regional Council members, state agency representatives, professional development providers, the Arizona Association for the Education of Young Children, early care and education providers, health and family support service agencies, and representatives from philanthropy. The Professional Development Workgroup continues as the advisory structure for the implementation of the professional development strategic plan to provide feedback and recommendations for ongoing development and implementation.

- Articulation. Describe: Articulation agreements exist through each individual community college and university. First Things First convenes the Professional Development Work Group that supports the Professional Development System Building. There are three subgroups that convene on specific policy areas, including Articulation. The Articulation group continues to work on a seamless transition from Community College to University without the loss of credit with degree completion as the goal.

- Workforce information. Describe: The Arizona Early Childhood Workforce Registry (Registry) is a web-based system that enables early childhood professionals and those interested in a career in early education to find and register for professional development opportunities and also to keep a record of their experience, education, professional development and credentials in a central location. It is also used to manage application and enrollment in First Things First College Scholarships for Early Childhood Professionals.

- Financing. Describe: ____
The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- ✔ Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: First Things First includes credit bearing professional development as a requirement in the Standards of Practice for all Professional Development for Early Care and Education Professionals grants.

b) ☐ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe:

☐ 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 Arizona Early Childhood Development and Health Board (First Things First) is the State Advisory Council. First Things First convenes the Professional Development Work Group that developed the Workforce Knowledge and Competencies and Professional Development Instructor and Technical Assistance Standards. Representatives from the Arizona Department of Economic Security, Child Care Administration are members of the Professional Development Work Group and participated in the development of the competencies and standards.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). Arizona Department of Education Arizona Department of Education Preschool Development Grants are offered to enable the delivery of high-quality preschool, and expand high-quality preschool programs in targeted high-need communities. In these targeted zip codes, Bachelor's degree-level scholarships are prioritized to early childhood educators working for an early learning provider that is a sub-grantee of the Preschool Development Grant. These educators must already possess an Associate degree and be working on coursework leading to a Bachelor’s degree with teaching certificate in Early Childhood Education or Early Childhood Special Education. Scholarship opportunities linked to the Preschool Development Grant will be available as long as there is funding.

First Things First (State Advisory Council)
First Things First College Scholarships are funded to support completion of the Child Development Associate credential (CDA), Associate degree, and Bachelor’s degree. Bachelor degrees are currently only offered in five regions, except in zip codes identified as eligible to participate in Arizona Department of Education Preschool Development Grant opportunities.

Program Improvement grants are available through the Quality First program of First Things First. Grants are awarded to enrolled providers based upon needs identified in a Quality Improvement Plan. These grants may be used to cover costs associated with improving quality; this includes training and education expenses. Quality First Program Improvement grants may be used for training and education activities. The following is a link to the website:
Department of Economic Security, CCDF Lead Agency

The Professional Career Pathway Project offers scholarships through Central Arizona College for tuition for early childhood education classes offered at community colleges throughout Arizona. The following is a link to the website: www.centralaz.edu/Home/Academics/Divisions_and_Programs/Early_Childhood_Education_Program/Scholarship_Opportunities.htm.

Financial incentives linked to educational attainment and retention. Describe:

First Things First (State Advisory Council) Incentive Funds are available to Quality First providers and provides financial support to all enrolled centers and homes for the purchase of educational materials, equipment and other resources that help improve the quality of their program. Some programs buy more age-appropriate books, toys or materials to help nurture the development of the children they serve. Others purchase new furniture or outdoor equipment to enhance their physical environments. How the funds are used will be decided in partnership with a coach according to the program's quality improvement plan. Funds are available annually, and the amount is based on the licensed capacity of children birth to five that the program serves. First Things First also supports Quality First providers whose programs are regulated by the Arizona Department of Health Services with financial assistance to pay for 50 percent of their licensing fees, which are due every three years.

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 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 early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)). The professional development requirements ensure that all professional development offered in the Registry are aligned with the Workforce Knowledge and Competencies. These competencies include eight core knowledge areas that include Health and Safety indicators as well as indicators about effective interactions, typical and atypical behavior, and abuse and neglect. The Competencies are aligned with the Arizona Early Learning Standards and Infant Toddler Developmental Guidelines.

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)). The Registry and all professional development offered through the Registry are accessible to Tribal organizations. Tribal organizations will be required to meet the Instructor and Technical Assistance Standards and align training content with the Workforce Knowledge and Competencies when using the Registry to provide professional development.

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:

- with limited English proficiency. The CCDF Lead Agency and its contractors have bilingual staff and provide information in English and Spanish. For other languages, both organizations use translation services (e.g., Language Line) or work with community resources for other languages.
- who have disabilities.

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 and Native Hawaiians (98.44(b)(2)(iii–iv)). The CCDF Lead Agency and its contractors have bilingual staff and provide information in English and Spanish. For other languages, both organizations use translation services (e.g., Language Line) or work with community resources for other languages.

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

- Describe the state/territory’s training and TA efforts for providers in identifying and serving children and their families experiencing homelessness (relates to question 3.2.2). The instructor and technical assistance (TA) provider requirements ensure that trainers and TA providers have knowledge and skills in the area in which they are instructing. Since all training through the Registry is required to be aligned with a core knowledge area, those who train in these content areas have knowledge and experience to support the workforce in serving all children. The CCDF Lead Agency requires contractors to provide all services in a culturally relevant and linguistically appropriate manner to the population served. Contractors are required to identify specific curriculum/curricula to be utilized for the proposed training and provide the rational for the curriculum/curricula selection. Training is specific and exclusive to identified content area. Trainings are to be delivered within the district so that a variety of appropriate trainings will be made available with regard to: age group served, level of expertise of participants of varying skill levels and experience, scheduling to enable related and or sequential trainings, and geographic location.

The CCDF Lead Agency identified priority areas of training and ensure the trainings are developed and offered statewide to child care providers through contracts funded through quality set aside dollars. Child care providers receiving CCDF funds will be required to obtain annual specified training in the subject areas as identified by the CCDF.
Lead Agency and outlined in the child care provider Registration Agreements. In partnership with community stakeholders and other State agencies, the CCDF Lead Agency has developed a training rubric to take a more intentional look at the quality of trainings statewide as well as developing a systematic mapping approach to identifying providers in high poverty / high need areas of the State.

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 3.2.2). Staff are provided training and on-going Technical Assistance and policy updates relating to statewide standard process for verification of an eligible activity when the client is unavailable to care for their child for a portion of the day due to participation in domestic violence shelter or homeless shelter directed activities (CCA 2-07-01-02 Verification of Unable/Unavailable Status), and general eligibility for families experiencing homelessness (DCFE 3-01-11-01 General Eligibility Criteria).

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). 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.

☒ Issue policy change notices
☒ Issue new policy manual
☒ Staff training
☒ Orientations
☒ Onsite training
☒ Online training
☒ Regular check-ins to monitor the implementation of CCDF policies. Describe the type of check-ins, including the frequency: Random onsite visits with DES contracted providers; site visits two times a year with DES Certified Family Child Care Providers
☐ Other. Describe: 

6.2.7 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 providers’ business practices, which can include training and/or TA efforts.

Describe the strategies that the state/territory is developing and implementing for training and TA. Statewide professional development is offered to child care providers to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services. The professional development trainings offered statewide are reviewed prior to implementing. The review process consists on ensuring that all professional development trainings are cross referenced with the Arizona State Preschool Guidelines, Arizona State Infant/Toddler Guidelines, Arizona State Program Guidelines, and the Arizona Workforce Knowledge and Competencies. Arizona also reviews and ensures that all professional development trainings include: theory based practices and developmentally appropriate practices as well as nationally
researched base practices that are implemented to ensure that high quality professional
development is delivered. Some examples of nationally recognized practices that are
implemented in Arizona's professional development are NAEYC Early Childhood
Program Standards and Zero to Three Early Development and Well Being which includes
Ages and Stages and Brain Development. Lastly, Center for Early Childhood Mental
Health Consultations resources and techniques are implemented through the Statewide
Expulsion Prevention professional development training. Arizona offers Technical
Assistance to providers who request additional assistance after completing a
professional development training. Technical assistance involves collaboration between
the participant, provider and technical assistance contractor. The collaboration efforts
include goal setting, challenges as well as desired outcomes.

Check the topics addressed in the state/territory's strategies. Check all that apply.

☐ Fiscal management
☐ Budgeting
☑ Recordkeeping
☑ Hiring, developing, and retaining qualified staff
☐ Risk management
☑ Community relationships
☐ Marketing and public relations
☑ Parent-provider communications, including who delivers the training,
education, and/or technical assistance
☐ Other. Describe:  

6.3 Early Learning and Developmental Guidelines

6.3.1 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.

Describe how the state/territory's early learning and developmental guidelines are
research-based, developmentally appropriate, culturally and linguistically appropriate,
and aligned with kindergarten entry. The Arizona Early Learning Standards have been
developed and is currently being revised by committee to provide a framework for the
planning of quality learning experiences that are developmentally appropriate for all
children birth through five. The recent revisions to the Arizona’s Early Standards will
reflect current research and knowledge as it pertains to infant/toddler development
which will be aligned to the Head Start Early Learning Outcomes Framework: Ages Birth to Five. The standards cover a broad range of skill development and provide a useful instructional foundation for children from diverse backgrounds and with diverse abilities. The standards are intended for use by all those who work with young children in any early care and education setting in urban, rural and tribal communities.

Describe how the state/territory’s early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. The state/territory’s early learning and developmental guidelines are appropriate for all children from birth to kindergarten as the standards address all developmental domains which is further divided into components that designate important areas of the child’s development. These standards address social interactions by the development of relationships with peers and adults. The developmental guidelines also address the learning environments that support optimal development of the whole child through active exploration opportunities. Lastly, the developmental guidelines reinforce children-initiated, child-directed, and teacher supported play.

Verify by checking the domains included in the state/territory’s early learning and developmental guidelines. Responses for “other” are optional.

b) ☒ Cognition, including language arts and mathematics  
☒ Social development  
☒ Emotional development  
☒ Physical development  
☒ Approaches toward learning  
☐ Other. Describe:

c)  

Describe how the state/territory’s early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body. In Arizona, First Things First, along with the Arizona Department of Education and other partners, developed infant and toddler early learning guidelines. The Arizona Infant and Toddler Developmental Guidelines document recognizes the importance of shared responsibility and accountability to achieve positive outcomes for all children. Arizona’s infants and toddlers are cared for, nurtured and educated in a variety of settings, including their own homes, family, friend and neighbor homes, child care centers, family child care homes, preschools and other early education programs. This document, like its companions, the Arizona Early Learning Standards (for all children 3 to 5 years of age) and the Arizona Program Guidelines for Quality Early Care and Education (for all programs serving children birth through Kindergarten), stresses the importance of collective efforts among families, early care and education professionals, health care professionals, family support providers, community members, and policymakers in supporting the learning and development of young children.

d)  

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. Arizona Early Learning Standards (AzELS) were last revised in May 2013 and the Infant/Toddler Developmental Guidelines (ITDG) were last revised in September 2012. They are updated approximately every five years.
If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards N/A

Provide the Web link to the state/territory’s early learning and developmental guidelines.
https://cms.azed.gov/home/GetDocumentFile?id=58795495aaadebe0c98a804fc

6.3.2 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. All quality first sites implement the Arizona Early Learning Guidelines within their curriculum.

7 Support Continuous Quality Improvement

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). 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 Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). 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 separate annual Quality Progress Report that will include a description of activities to be 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
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system 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.

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 is currently developing an assessment tool to assist in the process of determining the quality activity needs of the state. This will include an evaluation of available Quality First rated or National Accredited providers to determine targeted need for increasing availability of quality providers.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. N/A

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing.

☑ Supporting the training and professional development of the child care workforce
If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.

☑ CCDF funds
☐ Other funds. Describe:  

________________________________________________________________________
________________________________________________________________________

Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds. Describe: Development and maintenance of developmental guidelines are funded through the Arizona Department of Education who currently houses the Infant Toddler Guidelines, Preschool Guidelines, and Program Guidelines. The implementation of Early Learning and Developmental Guidelines are funded through First Things First Quality First.

Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds. Describe: DES contracted providers will qualify for 10 percent enhanced rate over the basic rate if the provider has a Quality First Start Rating of (4), or must hold a current Council for Professional Recognition (CDA). CDA pertains to group homes only. DES contracted providers will qualify for a 20 percent enhanced rate over the basic rate, the provider must be accredited by a DES accepted national accreditation agency or be a Quality First (5) star provider. The provider must provide DES with the corresponding documentation of national accreditation or CDA.

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds. Describe:

Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds. Describe:

Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

☐ CCDF funds
☐ Other funds. Describe:
 Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.
- ☒ CCDF funds
- ☐ Other funds. Describe: *First Thing First Tobacco Tax monies*.

 Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.
- ☒ CCDF funds
- ☐ Other funds. Describe:

 Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.
- ☒ CCDF funds
- ☐ Other funds. Describe:

☐ 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. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply.
- ☐ CCDF funds
- ☐ Other funds. Describe:

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

Lead Agencies can invest 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 in addition to the following (98.53(a)(1)).

#### 7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce.

Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.
- ☒ 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. Describe: The CCDF Lead Agency contracts with agencies to ensure that statewide professional development courses are available through the Arizona Early Childhood Workforce Registry. DES CCDBG Health and Safety modules address nutrition and physical activity through developmentally appropriate strategies/practices. Also, the Expulsion Prevention trainings available statewide address social and emotional development as well as Expulsion Prevention techniques. Lastly, the CCDBG Topic Specific trainings address multiple statewide supportive trainings to help young children with physical and cognitive development. These statewide trainings also provide technical assistance to the early childhood workforce. ADHS currently has seven free online LMS Empower courses, also listed in the Arizona Early Childhood Workforce Registry. Courses specific to the nutrition and physical activity Empower standards promote healthy social, emotional, cognitive, and physical development of children. DES Certification Specialists have also been offered multiple Empower Train-the-Trainer sessions to increase capacity of trainers on Empower topics in the community. Several Specialists have attended.

Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health 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 2.5.) Describe: Through the statewide training contracts the CCDF Lead agency provides behavior management strategies for promoting positive social-emotional development for the reduction in challenging behaviors by providing the professional workforce with the FLIP IT® trainings that is recognized nationally and developed by Devereux Advanced Behavioral Health Center for Resilient Children. The Lead Agency collaborates with Southwest Human Development - Smart Support program which supports early child care providers with mental health consultations to help reduce expulsion of children birth through five.

Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children’s positive development. Describe: The Lead Agency provides the early childhood workforce with statewide trainings focuses on the area of engaging family and community partnerships that address cultural and linguistically appropriate practices.

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. Describe: All statewide trainings are aligned with state/territory early learning and developmental standards. These statewide trainings address developmentally appropriate practices, evidence-based
curricula that focus on culturally and linguistically responsive instruction and learning environments.

☒ 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 early childhood workforce has access to statewide technical assistance that promote community partnerships and access to services that support their children’s learning and development.

☐ Using data to guide program evaluation to ensure continuous improvement. Describe: ______

☒ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: Through statewide efforts of recruitment of early childhood providers the Lead Agency ensures that geographical areas with significant concentrations of poverty and unemployment are pursued and accessible to families. The Lead Agency utilizes a GIS Mapping system tracks poverty, unemployment, and child care deserts to assist in recruitment.

☐ Caring for and supporting the development of children with disabilities and developmental delays. Describe: ______

☒ Supporting the positive development of school-age children. Describe: The Lead Agency partners and collaborates with the Arizona Center for Afterschool Excellence, provides developmentally appropriate training for school age children and support school age programs through a national accreditation process or quality improvement.

☐ Other. Describe:

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. Check all that apply.

☒ Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

☐ Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

☒ Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

☐ Other. Describe:

7.3.2 Describe the measureable indicators of progress relevant to this use of funds 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 State currently provides CCDF funds which allows for seventy-two CCDBG trainings to be delivered statewide. The State is in the continuous process of approving additional high quality trainings monthly. These trainings
have been developed by utilizing standard quality rubrics that align with NAEYC, Arizona Workforce Knowledge and Competencies, Arizona State Infant Toddler Guidelines, Arizona State Preschool Guidelines, and Arizona State Program Guidelines to measure the quality of the professional development trainings provided to CCDF child care program staff. These trainings assist the Arizona Early Childhood Workforce in implementing quality strategies and program improvements to address quality initiatives within Early Childhood programs. Within those seventy-two trainings, fifty-one training allow for the option to receive TA which is requested by the participant upon completion of the training. The TA is specific to the participant’s individual goals and desired outcomes related to the specific professional development topic training that they attended. Monitoring of the trainings includes evaluations and observation of the trainings/TA provided. Training evaluations are completed by participants after receiving training/TA. The feedback gathered from the evaluations are then used to implement improvements to the professional development trainings. The evaluations are also used to ensure that the trainings are being implemented/delivered to the participant with high quality professional development standards which include, but are not limited to, adult learning principles, theory-based and evidence-based. Observations are conducted monthly announced and unannounced to ensure that quality professional development standards are being put into practice. An observation tool that encompasses a rating system is used to evaluate the trainer/TA specialist which highlights the quality professional development performance measures that are demonstrated. The state allocates CCDF funds for the Professional Career Pathway Project (PCPP) which is a scholarship program for Early Childhood professionals to collaborate with community colleges, to identify an education goal/pathways, to pursue early childhood education coursework, and to accomplish their individual professional development goals. PCPP is available statewide through local community colleges which offer tuition coverage up to eighteen credits units per school year as well as textbook stipends. PCPP helps to increase the quality of child care programs by strengthening their working knowledge of early childhood competencies.

7.4 Quality Rating and Improvement System (QRIS)

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

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

☐ No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
☐ No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
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. **Quality First is administered through First Things First. Customers can search the statewide QIRS database at [www.qualityfirstaz.com](http://www.qualityfirstaz.com/).** 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.

☐ Yes, the state/territory has another system of quality improvement.

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds 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.

### 7.4.2 QRIS participation.

Are providers required to participate in the QRIS?

a) ☒ Participation is voluntary.

☐ Participation is mandatory for providers serving children 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).

☐ 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? Check all that apply.

☒ Licensed child care centers
☒ Licensed family child care homes
☒ License-exempt providers
☒ Early Head Start programs
☒ Head Start programs
☒ State prekindergarten or preschool programs
☐ Local district-supported prekindergarten programs
☒ Programs serving infants and toddlers
☐ Programs serving school-age children
☒ Faith-based settings
☒ Tribally operated programs
☐ Other. Describe: _____

### 7.4.3 Support and assess 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. **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). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

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.
☐ 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).
☐ 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).
☐ 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).
☐ Programs that meet all or part of state/territory school-age quality standards.
☐ Other. Describe:
☐ None.

7.4.4 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.
☐ Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
☐ Embeds licensing into the QRIS.
☐ State/territory license is a “rated” license.
☐ Other. Describe: Requires that all family child care home that are not licensed are certified by the Department of Economic Security, Child Care Administration.
☐ Not linked.

7.4.5 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.

☐ No
Yes. If yes, check all that apply.
☒ One time grants, awards, or bonuses
☒ Ongoing or periodic quality stipends
☒ Higher subsidy payments
☒ Training or technical assistance related to QRIS
☒ Coaching/mentoring
☒ Scholarships, bonuses, or increased compensation for degrees/certificates
☒ Materials and supplies
☐ Priority access for other grants or programs
☐ Tax credits (providers or parents)
☐ Payment of fees (e.g., licensing, accreditation)
☐ Other: [ ]
☐ None

7.4.6 Describe the measureable indicators of progress relevant to this use of funds 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. First Things First launched Quality First to partner with child care and preschool programs around the State to improve the quality of early learning in Arizona. Quality First provides each enrolled program with coaching and funding, and the program’s leadership and staff provides the dedication and hard work. The quality of each program is assessed using valid and reliable tools that focus on what research shows are the key components of quality early care, including adult-child interactions, learning environments and staff qualifications. Based on these assessments, each program is given a Quality First Star Rating, ranging from one to five stars. Quality First is about continuous quality improvement. The standards are high and reaching the quality levels is often a long-term process. Programs achieving Star Ratings in the quality levels (three stars and above) have met these standards. All participating programs are committed to quality and are making improvements that help prepare kids for school and life. Programs are assessed every one or two years, depending on their previous rating, and receive a new Star Rating with each assessment. Star Ratings help guide the improvement process by providing both an objective measure of each program’s quality and a goal to achieve. Quality early learning settings build on basic health and safety to include teachers who know how to work with young children learning environments that nurture the development of every child, and positive, consistent relationships, and interactions that give children the individual attention they need. Participation in Quality First is voluntary, and all programs enrolled in Quality First have made a commitment to improvements that research shows help young children thrive. Since the inception of Quality First, programs achieving the quality levels have increased from 25 percent in SFY 2013 to over 74 percent in SFY 2018.

How Star Ratings are Calculated:
Quality First Star Ratings are based on assessments of each early care and education program enrolled in Quality First. A highly-trained assessor visits each program to conduct classroom observations and teacher interviews and scores each program using valid and reliable assessment tools. A total of 1/3 of the number of classrooms at a program are included in the assessment process. Scores are combined to determine the program's
Quality First Star Rating. The standards and scales used are based on research and developed with input from educators and experts. The end result is a valid, objective measure of the quality of an early care and education program. Five Stars: Far exceeds quality standards; Four Stars: Exceeds quality standards; Three Stars: Meets quality standards; Two Stars: Approaching quality standards; One Star: Committed to quality improvement No Rating: Program is enrolled in Quality First but does not yet have a public rating.

Criteria Include: Health and safety practices that promote children’s basic well-being; Staff qualifications, including experience working with infants, toddlers, and preschoolers as well as training or college coursework in early childhood development and education; Teacher-child interactions that are positive, consistent, and nurture healthy development and learning; Learning environments, including age-appropriate books, toys and learning materials that promote emotional, social, language, and cognitive development; Lessons that follow state requirements or recommendations for infants, toddlers and preschoolers; Group sizes that give young children the individual attention they need; and Child assessment and parent communication that keeps families regularly informed of their child’s development. Assessment Tools Environment Rating Scales (ERS) are used to assess components of a program’s learning environment, such as arrangement of indoor and outdoor space, materials and activities, and use of language. Classroom Assessment Scoring Systems™ (CLASS™) examines the quality of the interaction between teachers and children in three domains: emotional support, classroom organization and instructional support. Quality First Points Scale is a tool designed by First Things First to assess three additional evidence-based components of quality: staff qualifications, administrative practices, and curriculum, and child assessment.

7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are encouraged to use the 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.

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.

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

☒ Establishing or expanding high-quality community- or neighborhood-based family and child development centers. 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: First Things First (State Advisory Council)
First Things First provides training and professional development to promote and expand child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Through Quality First coaches provide the introduction to the Infant Toddler Developmental Guidelines, and provide written Infant/Toddler Environment Rating Scale (ITERS) and Toddler Classroom Assessment Scoring Systems™ (CLASS™) reports.

☐ Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe: N/A

☒ Providing training and professional development to enhance child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Describe: **First Things First (State Advisory Council)**

First Things First Quality First coaches provide the introduction to the Infant Toddler Developmental Guidelines, and provide written Infant/Toddler Environment Rating Scale (ITERS) and Toddler Classroom Assessment Scoring Systems™ (CLASS™) reports.

☒ 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: **First Things First (State Advisory Council)**

First Things First provides training and professional development to promote and expand child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Through Quality First coaches provide the introduction to the Infant Toddler Developmental Guidelines, and provide written Infant/Toddler Environment Rating Scale (ITERS) and Toddler Classroom Assessment Scoring Systems™ (CLASS™) reports.

☒ 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: **DES and AzEIP work collaboratively to ensure that families of young children are aware of the variety of supports and resources for which they may be eligible within DES. The work of the Department Early Childhood Taskforce, and continuing work to ensure cross-divisional collaboration, enables Department employees to assist clients to identify the variety of supports and services that may be leveraged to support them. AzEIP utilizes a Team Based Early Intervention Services approach to the provision of early intervention services. The team, which includes an occupational therapist, speech language pathologist, developmental special instructions, and a physical therapist, determines with the family, who will serve as the team lead or primary provider. The team lead is then supported by other team members to address the child’s holistic development within their everyday routines and activities. For children enrolled in childcare, the team, with parental consent, can support the childcare provider to identify modifications to their classroom routines or make adaptations to their environment to support young children with disabilities to engage and participate in these everyday routines and activities. Using a capacity building approach, this not only assists the child care professionals to support the**
identified child, but can also assist the child care professionals to improve their capacity to care for all children in their classroom. The Department's Arizona Early Intervention Program State Systemic Improvement Plan (SSIP) is to improve the percentage of children birth to three who exit early intervention with improved social emotional growth. To achieve this outcome, the AzEIP is collaborating with the divisions within the Department (including CCA), as well as the Department of Education, Department of Health Services, and the State’s Medicaid (Arizona Health Care Cost Containment System (AHCCCS)) program to develop a cross-agency professional development framework that supports practitioners to improve the social emotional development of infants, toddlers, and preschoolers through: Use of appropriate screenings; Determining appropriate next steps after a screening; Providing anticipatory guidance to primary caregivers (utilizing responsive caregiving, resource-based capacity building, coaching, and mentoring); Evaluating (including identification of improved evaluation instruments to address this developmental domain); Use of Evidence-Based Practices to address delays in this domain; Developing plans to support primary caregivers within the home, community, childcare/early head start programs; and, Documenting individual progress overall.

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments. Describe: Arizona Department of Education
  Infant/Toddler Developmental Guidelines developed by the Arizona Department of Education and are infused into First Things First Quality First and Professional Development Strategies.

First Things First (State Advisory Council)
The State’s QRIS system, Quality First, has a Quality First Points Scale that assesses staff qualifications, administrative practices, and curriculum and child assessment. As part of the curriculum and child assessment portion, programs must show documentation that the instructional staff, directors and assistant directors have completed professional development on the Introduction to the Infant/Toddler Developmental Guidelines (ITDG) and the Introduction to the Arizona Early Learning Standards (AzELS). The Infant/Toddler Developmental Guidelines (ITDG) and Arizona Early Learning Standards (AzELS) must also be reflected in the written activity or lesson plans.

For an increase in points, programs must show documentation that the instructional staff, directors, and assistant directors have completed professional development on at least two of the modules from either the Infant/Toddler Developmental Guidelines (ITDG) or the Arizona Early Learning Standards (AzELS).

Child care providers receive technical assistance in a variety of ways. They may receive technical assistance from a coach in the Quality First system. The programs are assessed using the Infant/Toddler Environment Rating Scale (ITERS) and the Classroom Assessment Scoring Systems™ (CLASS™) appropriate for the age of the
classroom. Results are shared with the director and teachers. Action plans for improvement that may include direct Technical Assistance (TA) are written and implemented. If the program is not in Quality First, they may receive technical assistance through the professional development provided by the Arizona Department of Education – Early Childhood Education (ADE-ECE) unit and the program specialists that provide the Professional Development and Technical Assistance in the area as needed or requested. The program specialists work with the director of the program to evaluate the needs of the various classrooms and create a plan that may include Technical Assistance and Professional Development.

Arizona Department of Education – Early Childhood Education (ADE-ECE) also held an Infant/Toddler Summit:

☐ Developing infant and toddler components within the state/territory's child care licensing regulations. Describe: N/A

☒ Developing infant and toddler components within the early learning and developmental guidelines. Describe: Arizona Department of Education

The Arizona Department of Education – Early Childhood Education (ADE-ECE) unit has created four six-hour modules for each of Arizona’s Infant and Toddler Development Guidelines and for each of the Arizona Early Learning Standards, 3rd Edition. Professional development opportunities are provided throughout the state by a team of program specialists that work with programs in the communities including school districts, Head Starts, private providers, faith-based providers, home providers and home visitors. The Arizona Department of Education – Early Childhood Education (ADE-ECE) is also working with Institutes of Higher Education to make sure that the standards and guidelines are a part of the course work in community college and university classes.

First Things First (State Advisory Council)

The state QIRS system, Quality First, has a Quality First Points Scale that assesses staff qualifications, administrative practices, and curriculum and child assessment. As part of the curriculum and child assessment portion, programs must show documentation that the instructional staff, directors, and assistant directors have completed professional development on the Introduction to the Infant/Toddler Developmental Guidelines (ITDG) and the Introduction to the Arizona Early Learning Standards (AzELS). The Infant/Toddler Developmental Guidelines (ITDG) and Arizona Early Learning Standards (AzELS) must also be reflected in the written activity or lesson plans. For an increase in points, programs must show documentation that the instructional staff, directors, and assistant directors have completed professional development on at least two of the modules from either the Infant/Toddler Developmental Guidelines (ITDG) or the Arizona Early Learning Standards (AzELS).

☒ 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: **First Things First (State Advisory Council)**

Parents can access the First Things First Quality First website, regarding the characteristics of quality care. Available on the website are options to help parents find information about high quality infant and toddler care. Parents can access tools to help them choose a quality child care setting for their infant and toddler. A quality checklist is available for parents that includes questions to ask and things to look for when visiting a provider, including in classroom and outdoor environments, teacher/child interactions, and other basic elements of quality child care. Parents are provided the option to utilize a search tool to find quality early care programs for their infants and toddler. Quality is based on the Star Rating System and is a continuous quality improvement. The website includes criteria for the Star Rating System; Health and Safety practices, staff qualifications, teacher-child interactions, learning environments, lessons, group sizes, child assessment, and parent communication.

**Arizona Department of Economic Security, CCDF Lead Agency**

Child Care Resource and Referral (CCR&R)

Consumer education specifically in the area of recognizing the characteristics of high quality child care is one of the vital services that Arizona Child Care Resource & Referral (CCR&R) delivers. The CCR&R presents parents/guardians a choice of available child care providers assisting them with any questions they may have regarding different types of providers. The CCR&R is also responsible for conducting outreach activities to inform the community of the CCR&R services. The information is available in person, via telephones, online, and via media including television, radio, and social network. The official website has been developed and is available for families looking for information about high quality infant and toddler care at [www.azchildcare.org](http://www.azchildcare.org).

☐ 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: **N/A**

☐ Coordinating with child care health consultants. Describe: **N/A**

☐ Coordinating with mental health consultants. Describe: **N/A**

☐ Other. Describe: **N/A**

7.5.2 Describe the measureable indicators of progress relevant to this use of funds 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. Contracts established under the Quality Set Aside funds are monitored extensively through training and Technical Assistance observations. Tools are utilized and reported back to the contractor with any findings or issues discovered.
7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand 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 nonprofit, 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.

7.6.1 Describe the measurable indicators of progress relevant to this use of funds 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.

7.7 Facilitating Compliance with State Standards

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers’ compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

Arizona State Licensed Child Care Centers and Certified Child Care Group Homes: ADHS licenses or certifies the types of child care providers mentioned above for the state health and safety standards, 9 A.A.C. 3 Department of Health Services Child Care Group Homes and 9 A.A.C. 5 Department of Health Services Child Care Facilities. Surveyors inspect child care centers at least once a year and child care group homes at least twice a year for their compliance.

DES, CCDF Lead Agency, monitors the distribution of reimbursement to those child care centers and group homes that contract with the CCDF Lead Agency to provide child care for CCDF eligible children. The CCDF Lead Agency provides training for billing procedures and provides technical assistance as needed. The payments are monitored to make sure that all required standards are met prior to payments.

Arizona State Certified Family Child Care Home and In-Home Providers: DES, CCDF Lead Agency Certified Family Child Care Home and In-Home Providers must abide by the state requirements for inspection, monitoring, training, and health and safety, 6 A.A.C. 5, Article 52 Certification and Supervision of Family Child Care Home Providers. Certification specialists inspect CCDF Lead Agency certified family child care home providers at least twice a year, one announced and one unannounced. They also provide training and technical assistance is provided on a regular basis. In some counties, the certification specialists’ responsibilities are contracted out with CCDF quality set-aside funding.

Training and Technical Assistance: DES, CCDF Lead Agency contracts with a number of entities to provide training and technical assistance throughout the state. In each Arizona County, a single contractor is tasked not only with delivery of these services, but with coordinating the delivery of training in a coordinated manner within that county. Coordination is required with regard to:

A. Age groups served (i.e. infants, toddlers, preschool, school age, mixed age groups, other)
   1. Level of expertise of attendees (i.e. beginner, intermediate, and expert) and
scheduling to enable cohorts of child care providers to attend related and/or sequential trainings:

2. Need for the training topic as determined by the
   a. Availability of similar topics currently being provided;
   b. Location of similar trainings already offered; and,
   c. Current level of provider participation in these trainings.

3. Geographic location; and,

4. Other child care training funded by the CCDF Lead Agency or any other source.

The coordinating contractors are thus contractually required to assess continually the availability of trainings. In addition, the CCDF Lead Agency awards training and technical assistance contracts within Arizona counties at a level roughly proportional to the estimated number of providers in each county.

7.7.2 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: ______

7.7.3 Describe the measureable indicators of progress relevant to this use of funds 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 Arizona Early Childhood Workforce Registry (Registry) will ensure that professional development is aligned with the Workforce Knowledge and Competencies and are taught by an instructor or Technical Assistance (TA) provider that meets the State requirements and standards.

Arizona Certified Family Child Care Home and In-Home Providers:
According to the 6 A.A.C. 5, Article 52 Certification and Supervision of Family Child Care Home Providers, all DES (Department) certified family child care providers are monitored at least twice a year through on-site visits. Providers are also required to submit the sign in/out sheets for all children in care to the CCDF Lead Agency by the fifth day following the end of each month for monitoring purposes. The certification specialists use a tool called Article 52 Compliance Review, which is a seven-page document consisting of compliance items that are checked during each compliance visit. If a child care provider is found to be in non-compliance, the provider is generally given ten days to rectify the non-compliance issue(s). If the provider is still in non-compliance after ten days, the provider is placed on probation. Article 52 has a specific section that describes the adverse actions. Technical assistance is always available to certified family child care home and in-home providers through CCDF Lead Agency staff as well as through contractors. Qualified mentors are also available to assist family child care providers in improving the quality of child care programs and services in the State.
7.8  Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.8.1  Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children. **First Things First (State Advisory Council)**

Quality First participants are assessed by First Things First using the: Environment Rating Scales, Early Childhood Rating Scale (ECERS-R), Infant/Toddler Environment Rating Scale (ITERS-R); Classroom Assessment Scoring System (CLASS) (Pre-K, Toddler, Infant will be used in the near future); and Quality First Points Scale (staff qualifications, ratios & group sizes, staff retention, curriculum, child assessment). The Arizona Department of Education, Virginia G. Piper Charitable Trust, and First Things First are continuing to coordinate on development of a Kindergarten Developmental Inventory (KDI). The Kindergarten Developmental Inventory is a voluntary observational assessment to help inform a teacher and family about a child’s learning. The Kindergarten Developmental Inventory will be used in classrooms within 45-60 days after the start of kindergarten. It is intended to assess a child’s “best fit” on a developmental scale ranging from preschool to grades beyond kindergarten using 12-15 indicators that represent all developmental domains. In addition to the other assessment tools, staff qualifications, administrative practices, and child assessment/curriculum are measured in determining the quality rating for Quality First participants. The frequency of assessment is, at a minimum, every other year.

**Arizona Department of Economic Security, CCDF Lead Agency**

The CCDF Lead Agency funds the Arizona Self-Study Project (ASSP) which is contracted through two agencies; Child and Family Resources and Easter Seals Blake Foundation. The ASSP provides technical assistance and assesses child care providers’ progress in improving the quality of child care programs utilizing a national accreditation tool. The contractors assist each program in evaluating its strengths and weaknesses through on-site visits at least quarterly and via telephone/online contact on the regular basis. A pre "quality evaluation" at initial enrollment in the ASSP is conducted, and the evaluation is repeated annually thereafter to monitor progress. A post evaluation is conducted as well. The ASSP contractors assist up to 300 providers annually. Early care and education programs enrolled in the ASSP improve the overall quality of their program and demonstrate their willingness and ability to pursue and achieve national accreditation. Programs enrolled in the ASSP receive on-site, phone, and online technical assistance. Programs must achieve milestones to receive prior to using each identified portion of a mini-grant. During the ASSP two-year process, contractor’s review and document quality improvements implemented by the program and the actions for achieving accreditation by one of the accreditation bodies. Contractors conduct any additional activities that are deemed appropriate by the CCDF Lead agency to further assist participants in reaching the goals to improve and sustain a higher quality of care and education provided.

Additionally, the CCDF Lead Agency pays an enhanced rate for accredited programs. The intent of the enhanced rate is two-fold: 1) to make higher quality (accredited) and Quality First 4 Star and 5 Star provider child care slots available to CCDF subsidized children whose parents may not be able to afford this care; and 2) to encourage more providers to become accredited or Quality First Star Rated. This allows children whose parents are eligible for child care subsidies to enroll in programs providing higher quality of care by reimbursing
nationally accredited and 5 Star providers 20 percent and 4 Star 10 percent higher than the CCDF Lead Agency maximum rates.

7.8.2 Describe the measureable indicators of progress relevant to this use of funds 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. **First Things First (State Advisory Council)**

Child care providers receive technical assistance in a variety of ways. They may receive technical assistance from a coach in the Quality First system through First Things First. The programs are assessed using the Early Childhood Environment Rating Scale (ECERS-R) and the Classroom Assessment Scoring System (CLASS) appropriate for the age of the classroom. Results are shared with the director and teachers. Action plans for improvement that may include direct technical assistance are written and implemented.

**Arizona Department of Education**

If the program is not participating in Quality First, they may receive technical assistance through the professional development provided by Arizona Department of Education- Early Childhood Education (ADE-ECE) unit and the program specialists that provide the Professional Development and Technical Assistance in the area as needed or requested. The program specialists work with the director of the program to evaluate the ongoing needs of the various classrooms and create a plan that may include professional development and technical assistance.

7.9 Accreditation Support

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

☒ Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. 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. The CCDF Lead Agency funds the Arizona Self Study Project, which supports child care facilities wishing to pursue accreditation. Arizona Self Study Project provides on-site coaching assistance and monthly telephone support as well as training, self-study materials and networking opportunities. The CCDF Lead Agency’s enhanced rate for accredited programs started in August 1999. The intent of the enhanced rate is two-fold; 1) to make higher quality (accredited) child care slots available to CCDF subsidized children whose parents may not be able to afford this care; and 2) to encourage more providers to become accredited. This allows children whose parents are eligible for child care subsidies to enroll in programs providing higher quality of care by reimbursing nationally accredited providers ten percent higher than the CCDF Lead Agency’s maximum rates. All types of regulated child care programs are included in the tiered reimbursement system (child care centers, family child care homes, and school-aged child care programs).
☐ 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:

☐ 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:

☐ Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide.
   ☐ Focused on child care centers. Describe:
   ☐ Focused on family child care homes. Describe:

☐ No, but the state/territory is in the accreditation development phase.
   ☐ Focused on child care centers. Describe:
   ☐ Focused on family child care homes. Describe:

☐ No, the state/territory has no plans for accreditation development.

7.9.2 Describe the measureable indicators of progress relevant to this use of funds 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. DES, CCDF Lead Agency maintains information on accredited facilities that receive the enhanced rate for accreditation. First Things First maintains a database of individual programs that includes data on financial assistance, in the form of incentive grants and scholarships, to meet higher standards.

Quality First, the State’s Quality Improvement Rating System, evaluates the quality of early care and education programs through the use of the Environment Rating Scales, Classroom Assessment Scoring System, and Quality First Points Scale (administrative practices) on an annual or bi-annual basis (depending on the level of quality).

First Things First is conducting a multi-year validation study of the Quality First system that began in 2015. The first phase of the study will review the Quality First program design and data system and validate the Quality First rating scale to assess whether the five quality tiers represent different levels of quality. Subsequent years will evaluate the fidelity of implementation of the QIRS components and how child outcomes vary according to the Quality First star levels.

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children The Arizona Department of Education Program guidelines provide a framework for high-quality instructional program environment. First Things First provides QRIS high-quality rating scale using ITERS, ECERS, and CLASS assessments. Out of school time program uses Arizona Center for After School Excellence tools or Council on Accreditation (COA) to improve the quality of the care.

7.10.2 Describe the measureable indicators of progress relevant to this use of funds 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. Arizona Department of Education School districts and child care providers serving children ages three through five through funding from First Things First, Title I, and the Individuals with Disabilities Education Act are required to use Teaching Strategies GOLD, a web-based assessment instrument, to monitor the progress of child development throughout their participation in these programs. Teaching Strategies GOLD is currently aligned to the Arizona Early Learning Standards (2005). Teaching Strategies GOLD, the state-approved assessment instrument for children ages three through five, provides local and State level access to an alignment report, reflecting children’s attainment of the Arizona Early Learning Standards.

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable 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 Arizona Department of Education develops, maintains, and implements.

7.11.2 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 measureable 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: The Center for Afterschool Excellence has developed: School-age standards; and Self-assessment in meeting those standards.

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 (MOUs) within the Lead Agency’s various divisions that administer or carry out the various aspects of CCDF
- MOUs, 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 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. Check all that apply:

☐ Train on policy manual. Describe: ______
☐ Train on policy change notices. Describe: ______
☒ Ongoing monitoring and assessment of policy implementation. Describe: Monthly case reviews and second level reviews are conducted by the supervisor and the Review and Reconciliation (Quality Assurance) Unit. Random reviews of provider files are conducted by senior contracting staff to ensure that procedures are appropriately followed.
☐ Other. Describe: ______

8.1.2 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:

☒ Verifying and processing billing records to ensure timely payments to providers. Describe: The payment processing unit reviews billing documents prior to entering payments into the AZCCATS system.
☒ Fiscal oversight of grants and contracts. Describe: Fiscal oversight of the grants is provided by the Financial Services Administration.
☒ Tracking systems to ensure reasonable and allowable costs. Describe: AZCCATS and AFIS will be used.
☐ Other. Describe: ______

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

☒ Conduct a risk assessment of policies and procedures. Describe: The DES Office of the Inspector General (OIG) is responsible for the assessment and monitoring of the Department’s compliance with federal and state laws, rules, regulations, and DES policies and procedures.
☒ Establish checks and balances to ensure program integrity. Describe: The Internal Audit Administration (IAA) within DES/OIG provides independent and objective audit and advisory services for the Department to assure that DES operations comply with regulations, and to deter fraud, waste, and abuse. IAA also performs compliance audits of contractors to identify risk, recommend corrective action to prevent or mitigate issues, recoup improper payments, and assess compliance with laws and professional standards.
Use supervisory reviews to ensure accuracy in eligibility determination. Describe:
The review of eligibility case files to ensure accuracy is conducted by the Quality Assurance & Integrity Administration. The Error Trends Report is distributed to the CCA Program Managers and it is reviewed by all Eligibility Supervisors on a monthly basis.

☐ Other. Describe: 

8.1.4 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.

Check and describe all activities that the Lead Agency conducts 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. Include a description of the results of such activity.

a) 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: 

☐ Run system reports that flag errors (include types). Describe: The CCDF Lead Agency runs systematic reports that flag certain providers whose payments exceed anticipated billings. Further review of billing practices is initiated based on these reports.

☐ Review enrollment documents and attendance or billing records. Describe: Monthly, selected providers attendance records are reviewed and compared to the billing records to ensure accuracy.

☐ Conduct supervisory staff reviews or quality assurance reviews. Describe: Case reads are completed monthly within the Lead Agency.

☐ Audit provider records. Describe: Provider records are audited periodically to ensure accuracy.

☐ Train staff on policy and/or audits. Describe: Staff training is provided on all policy and procedures.

b) Other. Describe: Investigators embedded within the CCDF Lead Agency conduct provider and client investigations.

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.

☐ 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: 

☒ Run system reports that flag errors (include types). Describe: The CCDF Lead Agency runs systematic reports that flag certain providers whose payments exceed anticipated billings. Further review of billing practices is initiated based on these reports.

☒ Review enrollment documents and attendance or billing records. Describe: Monthly, selected providers attendance records are reviewed and compared to the billing records to ensure accuracy.

☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: Case reads are completed monthly within the Lead Agency.

☒ Audit provider records. Describe: Provider records are audited periodically to ensure accuracy.

☒ Train staff on policy and/or audits. Describe: Staff training is provided on all policy and procedures.

☐ Other. Describe: DES utilizes reconciliation reports to identify/resolve case processing discrepancies. Reports of this nature assist management in identifying potential errors made by field staff during the eligibility determination or service authorization processes. Identified errors are either corrected on a case-by-case basis in the field, or statewide policy clarifications are issued for broader impact regarding error prevention or resolution.

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.

☐ 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: 

☒ Run system reports that flag errors (include types). Describe: The CCDF Lead Agency runs systematic reports that flag certain providers whose payments exceed anticipated billings. Further review of billing practices is initiated based on these reports.

☒ Review enrollment documents and attendance or billing records. Describe: Monthly, selected providers attendance records are reviewed and compared to the billing records to ensure accuracy.

☒ Conduct supervisory staff reviews or quality assurance reviews. Describe: Case reads are completed monthly within the Lead Agency.

☒ Audit provider records. Describe: Provider records are audited periodically to ensure accuracy.
Train staff on policy and/or audits. Describe: Staff training is provided on all policy and procedures.

Other. Describe: DES utilizes reconciliation reports to identify/resolve case processing discrepancies. Reports of this nature assist management in identifying potential errors made by field staff during the eligibility determination or service authorization processes. Identified errors are either corrected on a case-by-case basis in the field, or statewide policy clarifications are issued for broader impact regarding error prevention or resolution.

8.1.5 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.

Check and describe all activities 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. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: Although there is no minimum dollar amount to trigger overpayment recovery efforts, the CCDF Lead Agency can elect not to pursue overpayment recovery when the cost of recoupment equals or exceeds the amount of the overpayment.
- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: DES refers all provider overpayments to the Office of Accounts and Receivables for collection.
- Recover through repayment plans. Describe: The Office of Accounts and Receivables sets up repayment plans.
- Reduce payments in subsequent months. Describe: ____
- Recover through state/territory tax intercepts. Describe: ____
- Recover through other means. Describe: ____
- Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: Click or tap here to enter text.

Other. Describe: Although there is no minimum dollar amount to trigger overpayment recovery efforts, the CCDF Lead Agency can elect not to pursue overpayment recovery when the cost of recoupment equals or exceeds the amount of the overpayment.

Check 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:
Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: Although there is no minimum dollar amount to trigger overpayment recovery efforts, the CCDF Lead Agency can elect not to pursue overpayment recovery when the cost of recoupment equals or exceeds the amount of the overpayment.

Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency). Describe: DES refers all provider overpayments to the Office of Accounts and Receivables for collection.

Recover through repayment plans. Describe: The Office of Accounts and Receivables sets up repayment plans.

Reduce payments in subsequent months. Describe: _____

Recover through state/territory tax intercepts. Describe: _____

Recover through other means. Describe: _____

Establish a unit to investigate and collect improper payments. Describe: The CCDF Lead Agency has embedded internal affairs investigators dedicated to the investigation of Child Care Assistance clients and providers suspected of having an improper payment. The investigators work with the provider Contracts Unit for provider improper payments and the Review and Reconciliation (Quality Assurance) Unit for client improper payments.

Other. Describe: _____

c) 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.

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: Although there is no minimum dollar amount to trigger overpayment recovery efforts, the CCDF Lead Agency can elect not to pursue overpayment recovery when the cost of recoupment equals or exceeds the amount of the overpayment.

Coordinate with and refer to the other state/territory agency (ies) (e.g., state/territory collection agency, law enforcement agency). Describe: DES refers all provider overpayments to the Office of Accounts and Receivables for collection.

Recover through repayment plans. Describe: The Office of Accounts and Receivables sets up repayment plans.

Reduce payments in subsequent months. Describe: _____

Recover through state/territory tax intercepts. Describe: _____

Recover through other means. Describe: _____

Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: _____
8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

☒ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. Describe: Proposed administrative rules require an automatic appeals process for any client charged with an Intentional Program Violation. An Independent Administrative Law Judge will review the documentation, hear testimony, and determine whether to apply the Intentional Program Violation sanction.

☒ Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. Describe: Providers who have been terminated for fraud (whether administratively or criminally determined) will have their contracts terminated and will be permanently disqualified from re-contracting with the CCDF Lead Agency. There is no appeal process once fraud has been determined.

☒ Prosecute criminally. Describe: In some cases, the Attorney General will make a determination to prosecute a child care provider for fraud.

☐ Other. Describe: [ ]
Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered “transitional and legislative waivers” to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 – 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019.

If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

☐ Appendix A.1: In-state criminal registry or repository checks with fingerprint requirements for existing staff. (See related question at 5.4.1 (b).)
  • Describe the provision from which the state/territory seeks relief.
• Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
• Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

☐ Appendix A.2: In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b).)
• Describe the provision from which the state/territory seeks relief. 
• Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. 
• Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

☐ Appendix A.3: In-state child abuse and neglect registry requirements for existing staff. (See related question at 5.4.3 (b).)
• Describe the provision from which the state/territory seeks relief. 
• Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. 
• Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

☐ Appendix A.4: National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b).)
• Describe the provision from which the state/territory seeks relief. 
• Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. 
• Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

☒ Appendix A.5: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for new or prospective staff. (See related question at 5.4.5 (a).)
• Describe the provision from which the state/territory seeks relief. 
• Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for new or prospective staff.
• Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.
Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b).)
- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a).)
- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for new or prospective staff.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.

Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b).)
- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a).)
- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for new or prospective staff.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.
Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b).)
- Describe the provision from which the state/territory seeks relief.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a).)
- Describe the provision from which the state/territory seeks relief. Interstate child abuse and neglect registry check for new or prospective staff.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for new or prospective staff.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.

Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b).)
- Describe the provision from which the state/territory seeks relief. Interstate child abuse and neglect registry check for existing staff for providers who are not contracted with the Lead Agency.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for staff of child care providers who are not contracted with the state. If a provider is contracted with the state, currently, a search of interstate child abuse and neglect registry is completed.
- Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.

Appendix A.13: New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9.)
- Describe the provision from which the state/territory seeks relief. New staff hired to work provisionally until background checks are completed.
- Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. The waiver will allow the State to determine the best method to ensure requirements for new or prospective staff.
Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. The State will continue to work towards full compliance of criminal background checks.