

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

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## 1 Define CCDF Leadership and Coordination with Relevant Systems

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

### 1.1 CCDF Leadership

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

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

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

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Tennessee Department of Human Services

Street Address: 505 Deaderick Street

City: Nashville

State: Tennessee

ZIP Code: 37248

Web Address for Lead Agency: <https://www.tn.gov/humanservices.html>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Clarence H.

Lead Agency Official Last Name: Carter

Title: Commissioner

Phone Number: 615-313-4700

Email Address: [Clarence.H.Carter@tn.gov](mailto:Clarence.H.Carter@tn.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.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Jude

CCDF Administrator Last Name: White

Title of the CCDF Administrator: Assistant Commissioner, Child Care and Community Services

Phone Number: 615-837-5092

Email Address: Jude.White@tn.gov

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

CCDF Co-Administrator First Name: Gwen

CCDF Co-Administrator Last Name: Laaser

Title of the CCDF Co-Administrator: Director, Child Care Services

Description of the Role of the Co-Administrator: The Co-Administrator is the Director of Child Care Services with the Division of Child Care and Community Services

Phone Number: 615-313-3893

Email Address: Gwen.Laaser@tn.gov

## 1.2 CCDF Policy Decision Authority

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

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

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

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

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

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

ii. Sliding-fee scale is set by the:

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

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

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

iv. Licensing standards and processes are set by the:

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

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

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

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

A. State or territory

Identify the entity:

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

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

C. Other.

Describe:

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

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

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

Who conducts eligibility determinations?

CCDF Lead Agency

TANF agency

Local government agencies

CCR&R

Community-based organizations

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

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

Who issues payments?

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

Who monitors licensed providers?

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

Who monitors license-exempt providers?

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

Who operates the quality improvement activities?

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

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

Tennessee Department of Education (TDOE) - Collaboration on a variety of early education initiatives that include but are not limited to provision of child care services and voluntary Pre-K; Tennessee Department of Children's Services (TDCS) - Facilitation of child care for children in state custody or protective services; Tennessee Department of Commerce & Insurance (TDCI) - Conducts fire inspections of child care facilities; Tennessee Department of Health (TDOH) - Conducts general environmental, food service, and immunization inspections of child care facilities; Child Care Resource & Referral (CCR&R) - Provides training and technical assistance for child care agency staff; Tennessee Early Childhood Training Alliance (TECTA) - Provides professional development opportunities for child care agency staff; Tennessee Social Work Office of Research and Public Service (SWORPS) - Supports technology, data collection/reporting, and training evaluation; Association of Infant Mental Health in Tennessee (AIMHiTN) - Provides supports to address mental health of infants/young children and families; Community Foundation of Middle Tennessee (CFMT) which provides a portfolio of shared services for providers and facilitates the processing and distribution of grants to providers; Tennessee Department of Finance & Administration - Supports processing of payments to providers and contractors.

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

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

--Tasks to be performed

--Schedule for completing tasks

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

--Monitoring and auditing procedures

--Indicators or measures to assess performance of those agencies



Any other processes to oversee and monitor other agencies.

The following represent processes, procedures, and indicators that are used to monitor administrative and implementation responsibilities performed by other agencies: Memoranda of Understanding; Contract with partners and agencies; Monitoring by the Lead Agency of partner agencies providing training and technical assistance to providers. A MOU is maintained with the Department of Education to facilitate collaboration on a variety of education initiatives that include but are not limited to provision of child care services and voluntary Pre-K. A MOU is maintained with the Department of Children's Services to facilitate child care for children in state custody of protective services.

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

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

The Lead Agency would follow federal guidelines for including language in RFPs that support system transferability and address intellectual property rights to comply with the provisions of 98.15 (a) (11).

**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.**

The Lead Agency works with the Office of General Counsel and the State of Tennessee Central Procurement Office on rules prohibiting disclosure of information that is:

- Protected as confidential or privileged pursuant to any state or federal law, regulation, court order or court rule; or
- Protected as privileged under any statutory or common law privilege; or
- Protected as any attorney work product; or
- Protected by the attorney/client or any other professional privilege; or
- Reasonably expected by its disclosure to reveal the name or location of a source that is protected by state or federal law or regulation as part of any statutory or regulatory requirements for reporting of abuse, neglect or harm, or that is protected by state or federal law or regulation as part of any statutory or regulatory requirement for the purpose of protecting any person from the threat of domestic violence.

### 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](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf).

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

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

#### Consultation

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

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

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

The Lead Agency facilitated a focus group for state and local community partners, representatives of local governments, and statewide quality contract partners in February 2021 to discuss the plan pre-print. A communication with information on date, time, and the registration link for this virtual session was emailed to all key stakeholders in this group. Meeting attendees were presented with an overview of the CCDF Plan development process, high level focus for each section of the plan, implemented quality initiatives, initiatives in development, and information about requirements for assessing the cost of care. This focus group presented an opportunity to engage stakeholders to determine the needs of the child care community and to increase partnerships needed to improve services statewide. Attendees who participated included Tennessee Young Child Wellness Council, Child Care Resource & Referral, Tennessee Association for Child and Early Education, TN Commission on Children and Youth, Emergency Management, Head Start Collaboration, TANF, Child Care Nashville, Child & Adult Care Food Program, Public Health, Mental Health, AimHiTN (Infant Mental Health), Chattanooga Office of Early Learning, TN Department of Education Special Populations, TN Early Childhood Training Alliance (TECTA), Signal Centers.

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

The director of child care services is the Tennessee Young Child Wellness Council (TYCWC) representative from the Lead Agency and participates as an active member of the council. Members from the TYCWC participated in the statewide Focus Groups. The council formed in 2013 when the governor's Early Childhood Advisory Council and the Early Childhood Comprehensive Systems State Action Team merged. Council membership includes representatives from state agencies, private care providers, advocates and families from all over the state. TNYCWC serves as the advisory committee for Tennessee's Maternal, Infant and Early Childhood Home Visiting (MIECHV) program. MIECHV is a grant from the Health Resources & Services Administration within the U.S. Department of Health and Human Services that is received by the Tennessee Department of Health to administer Evidence-Based Home Visiting Programs and support the state's early childhood system of care.

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

Not Applicable

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

Lead Agency staff consulted with stakeholders that included early care and educators, Child Care Resource & Referral, higher education, Department of Health, Department of Education, Department of Mental Health, Emergency Management, TN Commission on Children and Youth, Head Start, Public Health, Tennessee Early Childhood Training Alliance, TANF, CACFP, Department of Children's Services, state and local child care associations, Child Care Certificate staff, families and the general public.

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

Reminder:

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

a) Date of the public hearing. 05/25/2021

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

b) Date of notice of public hearing (date for the notice of public hearing identified in a. 05/04/2021

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

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

The public hearing notice and a draft of the Plan was posted on the lead agency website in advance of the public hearings. The notice included a link to the posted Plan. Information about the posting was sent directly to child care providers and partners via email on May 4th. Information about the notice was also distributed via the Lead Agency's social media. Additionally, information about the scheduled public hearings was also included in the multiple focus groups held with providers/partners during the plan development process.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. Due to the circumstances of the pandemic two public hearing sessions were conducted via WebEx on May 25, 2021. One session was held during the afternoon and a second session was held in the evening.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.)

The public hearing notice and a draft of the Plan was posted on the lead agency website in advance of the public hearings. The notice included a link to the posted Plan.

Information about the posting was sent directly to child care providers and partners via email on May 4th.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Information collected during focus group meetings and public hearings was reviewed and considered in developing the content of the plan.

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

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

<https://www.tn.gov/humanservices/information-and-resources/tdhs-reports-and-information.html>

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

Working with advisory committees.

Describe:

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:

Information about the public hearings was shared through Facebook and Twitter as

follows:

May 4 - 2.2 thousand Facebook views / 537 Twitter impressions

May 6 - 2 thousand Facebook views / 544 Twitter impressions

May 12 - 2.2 thousand Facebook views / 452 Twitter impressions

May 14 - 1.8 thousand Facebook views / 580 Twitter impressions

May 18 - 1.8 thousand Facebook views / 1245 thousand Twitter impressions

- Providing notification to stakeholders (e.g., parent and family groups, provider groups, advocacy groups). Describe:

Describe:

The public hearing notice and a draft of the Plan was posted on the lead agency website in advance of the public hearings. The notice included a link to the posted Plan. Information about the posting was sent directly to child care providers and partners via email on May 4th.

- Working with statewide afterschool networks or similar coordinating entities for out-of-school time.

- Other.

Describe:

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

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

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

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

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

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

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

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

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

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

The Lead Agency facilitates quarterly partner agency meetings that include the Department of Health, Department of Education, and the State Higher Education to coordinate statewide CCDF early care and education services. These meetings provide a platform for coordination of Quality Contracts, and assessment of current and new resources and services needed to support children's early learning and development and the implementation of the 2 Generation approach to family supports. Through the Tennessee Young Child Wellness Council, the Lead Agency will seek recommendations for representatives of local government to engage in partner agency meetings. The Lead



Agency has developed a collaborative partnership with the Department of Economic and Community Development to braid funding for child care expansion and growth. Through this partnership, the Lead Agency is engaging with local Development Districts, Government and Community Leaders to identify child care needs and build capacity based on the individual community needs. The Tennessee Development District Association or TDDA is an association of the nine state-wide development districts, which were established by the General Assembly under the Tennessee Development District Act of 1965. The Act established a statewide system of nine regional planning and economic development organizations to promote intergovernmental cooperation on growth and development issues, including regional and statewide concerns. The organizations also promote more effective utilization of available resources in dealing with these needs. The Board Membership for each Development District is made up of the chief elected officials from member counties and cities, a designated economic development professional from each county, and one Senator and one State Representative from within each region. The Tennessee Development District Association was established to serve as a statewide forum for the diverse problems the Districts must solve in their mission to serve 95 counties and some 350 municipalities. The Lead Agency also engages the Association of County Mayors. This association serves as a liaison between the highest elected county officials in the state as a group, and the Governor's office, the state legislature, numerous state government agencies and other county and municipal organizations.

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

The director of Child Care Services is the Lead Agency representative on the Tennessee Young Child Wellness Council and attends regularly occurring council meetings to coordinate statewide CCDF early care and education services. These meetings provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's early learning and development and the implementation of the 2 Generation approach to family supports.

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

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

NA

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

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

The Lead Agency meets with representatives from the agency responsible for IDEA(Department of Education) on a regular basis. These meetings provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's early learning and development and the implementation of the 2Generation approaches to family supports.

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

The Lead Agency maintains an ongoing working relationship with the Head Start state collaboration office. Regular meetings and contacts provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's early learning and development and the implementation of the 2Generation approach to family supports.

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

The Lead Agency maintains a partnership with the Tennessee Department of Health (TDH) and six regional metropolitan public health departments which have responsibility for immunizations in Tennessee. Additionally, TDH and the Lead Agency actively participate in regularly scheduled and recurring meetings that provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's health, early learning and development as well as the implementation of the 2 Generation approach to family supports.

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

Describe the coordination goals, processes, and results:

The Lead Agency maintains a working relationship with the local and state entities responsible for employment services and workforce development. The Director of Child Care Services participates in the Workforce Development council. The Lead Agency also participates in the State Workforce Development Board (SWDB). Under the direction of the State Workforce Development Board (SWDB) and in consultation with the Operations Committee the AJC Job Seeker workgroup assists in ensuring an integrated, viable, physically and programmatically accessible workforce system for Tennesseans regardless of an individual's point of entry. To ensure accessibility and access for **ALL** Tennesseans, the workgroup will institute a whole family approach, which will leverage partnerships across the public & private sectors and include support from community & faith-based organizations and state and local government. Tennessee has fully integrated child care services for low-income families enrolled and in and in compliance with the Supplemental Nutrition Assistance Program (SNAP) Employment and Training program. This collaboration includes Child Care Services, SNAP, the Tennessee Department of Labor and Workforce Development along with their subcontractors. These partners will design and manage a plan to maximize the delivery and availability of safe and stable child care services that will assist families seeking to become independent from public assistance while parent(s) are either working or attending job training or educational programs in order to become self-sufficient. This two generation change initiative will work to redesign childcare service delivery to better meet the needs of families and children. This will help participants and their children to access opportunities that will increase their financial security, education and skills, social capital, and health and well-being. Families First, the state's Temporary Assistance for Needy Families (TANF) program, is a workforce development and employment program under the Lead Agency. It is temporary and has a primary focus on gaining self-sufficiency through employment. The Families First program helps participants reach this goal by providing transportation, child care assistance, education, job training, employment activities, and other support services. Temporary cash assistance is also provided to families with dependent children when at least one parent is incapacitated, unemployed, deceased, or absent from the home, and the family is unable to pay for essential living expenses. \ Smart Steps Child Care Payment Assistance Program was established to provide Child Care support to working families and those pursuing post-secondary educational goals.

This allows TDHS to apply two-generational approaches in alignment with the commitment to creating cycles of success. The Smart Steps Program aligns with the Office of Child Care priorities for increasing access to quality childcare services. The Lead Agency created Smart Steps to support two generation pathways by providing child care financial support to parents who are working or in education programs and offer quality early learning experiences for their children. By providing continuity of care for the child, we are enabling the child to remain in a stable environment, which will better prepare them for school and on-going educational success. In addition, stable child care is critical to strengthening parents' ability to go to work, improve their prospects in the job market and increase earning potential which is crucial to self-sufficiency. This supports eligible families with Child Care financial assistance to foster self-sufficiency and promote children's learning and development in quality early care and educational programs. In order to enhance the consumer education, so that families become more aware of the importance of quality child care and supports such as the Smart Steps Child Care Payment Assistance Program, the Lead Agency is developing a statewide media campaign to ensure all families are aware of how to access child care services in their local area and to raise awareness about the state's redesigned Quality Rating Improvement System (QRIS). We want to build the knowledge of our families about child care and other services that families may be eligible to receive. We will provide information to families using multimedia, community partnerships, and other communication methods, including translation of materials to languages other than English, to strengthen dissemination and access to families and consumers.

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

The Lead Agency engages in ongoing collaboration and partnerships with the Tennessee Department of Education to:

- Support children and families;
- Align early learning standards in child care programs with Pre-K and Kindergarten;
- Improve the transition from child care programs to early education;
- Help early educators understand the connection between quality child care programs, school readiness, and positive outcomes;
- Develop a system that promotes effective communication and connections between child care educators and Pre-K and Kindergarten; and
- Promote the 2 Generation approaches to family engagement and support services

through several targeted program initiatives.

The Lead Agency partnered with Governor's Early Literacy Foundation (GELF), formerly known as "Books from Birth" to provide families with the resources to strengthen early literacy skills in children and encourage caregiver engagement around reading. Through this partnership, every age-eligible child entering the child care subsidy program is enrolled into Dolly Parton's Imagination Library. Dolly Parton's Imagination Library, in partnership with GELF, is an early literacy program available to all children from birth to 5 years old living in Tennessee. Once children are enrolled in the program, a new book is mailed to each child every month until he or she turns five. The books are provided to children at no cost to the family and regardless of income. As of September 2020, the Lead Agency's commitment to enroll age-eligible Child Care Certificate Program participants in Dolly Parton's Imagination Library has resulted in enrollment of more than 29,000 children. Each book is high-quality, age appropriate and includes reading comprehension activities and suggestions. To further encourage caregiver engagement around reading, GELF provides literacy resources and reading tips to enrolled families. This partnership provides families and caregivers with additional opportunities to read with their children and engage in literacy-rich experiences.

The Early Literacy Matters 3-hour Introduction to Literacy: Early Literacy Matters training that was added to the Tennessee Child Care Online Training System which left a significant amount of curriculum that was determined to be best delivered in the Tennessee State University eLearn platform with users who can access some guided instruction. This training was expanded into a 30-clock hour Literacy Orientation, TECTA Early Literacy 30: Books and Beyond.

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

The Lead Agency is responsible for licensing child care agencies.

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

The Lead Agency administers the Child and Adult Care Food Program (CACFP), Summer Food Service Program (SFSP) and the Supplemental Nutrition Assistance Program (SNAP). Lead Agency partners with CACFP and SFSP to provide a bridge for these programs that offer afterschool snack and supper options for children from at-risk

environments. Lead Agency continues promotion of good nutrition and physical activity in child care agencies enrolled in CACFP and encourages participation of eligible child care centers and homes. Tennessee has fully integrated child care services for low-income families enrolled and in compliance with the Supplemental Nutrition Assistance Program (SNAP) Employment and Training program. This collaboration includes Child Care Services, SNAP, the Tennessee Department of Labor and Workforce Development along with their subcontractors. These partners designed and managed a plan to maximize the delivery and availability of safe and stable child care services that assists families seeking to become independent from public assistance while parent(s) are either working or attending job training or educational programs in order to become self-sufficient. This 2 Generation change initiative works to redesign childcare service delivery to better meet the needs of families and children. This helps participants and their children to access opportunities that will increase their financial security, education and skills, social capital, and health and well-being.

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

The Lead Agency established relationships with the Tennessee Association of Community Action (TACA) through a partnership with the DHS Community Service Block Grant (CSBG) program to collect data on children (ages 0 to 5) statewide experiencing homelessness and the Tennessee liaison to the National Center for Homeless Education to share information and coordinate activities associated with services for homeless children and families. Community Action Agencies (CAAs) are private nonprofit and public organizations created out of Economic Opportunity Act of 1964 to combat poverty. CAAs assess community needs and resources, establish priorities, determine strategies to address local poverty issues, and in partnership with community organizations, deliver a broad range of comprehensive services to create economic opportunity and have a measurable impact in the lives of those in our communities.

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

The Lead Agency also administers TANF. The overall goal is to improve service delivery and provide consumer education to TANF recipients. Child Care Certificate Program staff and Family Assistance staff of the Lead Agency working in local Tennessee Department

of Human Services offices administer child care services for eligible families.

**xiii. Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals, processes, and results:**

The Lead Agency coordinates information about the child care health insurance program (CoverKids) for CCDF families and children receiving child care services through consumer education services provided by the Lead Agency and its partners, including Child Care Resource and Referral (CCR&R) and through consumer education publications and websites.

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

The Lead Agency is among a collaborative network of participants working with the Tennessee Commission on Children and Youth to support specific goals through the Building Strong Foundations for Families project through a state grant received from ZERO TO THREE. This project focuses on Infant and Early Childhood Mental Health Practices, strengthening Tennessee's comprehensive early childhood system and connecting families to services.

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

The Lead Agency coordinates early care and education services statewide in collaboration with Child Care Resource and Referral and the Tennessee Early Childhood Training Alliance to improve the quality of child care services for children, families, and the child care workforce. Services delivered to children and families are consistent with the two generational approach adopted by the Lead Agency.

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

The Lead Agency coordinates early care and education services statewide for school-age children in collaboration with the Child Adult Care Food Program (CACFP), Summer Food Service Program (SFSP), and Tennessee Afterschool Network to improve the quality of child care service for children, families, and the child care workforce.

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

The Lead Agency coordinates statewide responses for early care and education in collaboration with the Tennessee Emergency Management Agency (TEMA) in support of the Tennessee Comprehensive Emergency Management Plan. The Lead Agency actively participates with the Children in Disaster taskforce that is facilitated by TEMA, Tennessee Department of Health, Tennessee Department of Education, Child Care Resource and Referral (CCR&R), and other public agency, nonprofit, and institutional partners to provide emergency preparedness training and awareness for child care agencies statewide.

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

b. The following are examples of optional partners a state might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.

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

Describe

The Lead Agency coordinates early care and education services through multiple Early Head Start Child Care Partnerships statewide. Per the Early Head Start Child Care partnership grant guidelines, the Lead Agency provides support to assist in maintaining 25% subsidized slots for each approved Early Head Start classroom. The rate is paid based upon child care agency payment rate determined by the agency's quality star rating. The Lead Agency also maintains a relationship with and coordinates activities with the TN Head Start Association.

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

Describe

The Lead Agency maintains extensive partnerships with Tennessee State University and the University of Tennessee to support early care and education services for



children and families statewide. The Lead Agency provides financial assistance for students enrolled in higher education early childhood education programs pairing with state initiatives, such as TNReconnect and TNPromise. All Child Care Services staff receive training on TNReconnect to better understand the initiative to share with families and the child care workforce. The Lead Agency additionally collaborates through its partnerships with universities, community colleges, and/or colleges of applied technology as institutions of higher education coordinated by the Tennessee Higher Education Commission to facilitate the development of articulation and accreditation planning to support the early childhood education workforce.

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

[Describe](#)

- [iv. State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.](#)

[Describe](#)

The Tennessee Department of Health (TDH) administers the Maternal and Child Home Visitation Program. The Lead Agency meets regularly with TDH staff to explore opportunities to cross promote priority initiatives from both Departments.

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

[Describe](#)

The Lead Agency maintains multiple partnerships with the Tennessee Department of Health (TDH), the state agency responsible for Early and Periodic Screening. TDH staff participate in regularly scheduled recurring meetings that provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's early learning and development and the implementation of 2Generation approach to family supports.

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

[Describe](#)

The Lead Agency maintains a regular working relationship with the Department of Children's Services (DCS) to facilitate child care opportunities for children in foster

care or state custody. The Lead Agency also established an automated process with the agency to check prospective child care educators against the child abuse and neglect registry maintained by DCS. Additionally, the Lead Agency and DCS works collaboratively to investigate reports of imminent risk or allegations of child abuse and/or neglect which may include injuries and/or fatalities. The Lead Agency also works to support expedited and efficient enrollment of children placed in foster care into the child care payment assistance program as appropriate. Multiple channels of communication have been established between the Lead Agency and the child welfare agency to support timely and efficient services. In 2019, the Lead Agency began using CCDF funds to pay for children in foster care who require child care assistance.

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

[Describe](#)

The Lead Agency maintains working relationships with provider groups to coordinate services to support children and families. These working relationships include groups such as the Tennessee Family Child Care Alliance, Tennessee Association for Children's Early Education, and ChildCareNashville.com.

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

[Describe](#)

[ix. Other.](#)

[Describe](#)

The Lead Agency also serves on the State Interagency Coordinating Council (SICC). The State Interagency Coordinating Council for TEIS has established a guiding vision to support the Department of Intellectual & Developmental Disabilities through a statewide comprehensive, coordinated, multidisciplinary, interagency system of early intervention services for infants and toddlers with disabilities and their families in Tennessee. This council is statutorily created and required by law.

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

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

- No (If no, skip to question 1.5.2)
- Yes. If yes, describe at a minimum:

a) How you define "combine"

Pooling resources to support the child care system. In this case combining funding

contributes to our ability to deliver a more unified system of support to Pre-K Children and their families by utilizing Department of Education funds for Pre-K Services.

**b) Which funds you will combine**

Maintenance of Effort (MOE) expenditures from the Tennessee Department of Education will be combined with funds from the Tennessee Department of Human Services to meet MOE requirements.

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

To further care for Pre-K children and their families by providing wrap around childcare support for working families.

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

Funds are only combined at the state level.

**e) How are the funds tracked and method of oversight**

Funds are tracked in Edison (the state electronic online payment system).

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

Note:

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

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

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

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

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

If checked, provide the estimated percentage of the matching fund requirement that will be met with Prekindergarten expenditures (not to exceed 30 percent): 29% or approximately \$5.1 Million.

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

Collaboration is a cornerstone of the Tennessee Child Care Services and Voluntary Pre-K (VPK) systems. Collaborative structures like the TN Young Child Wellness Council and Tennesseans for Quality Early Education provide a forum to explore initiatives that enhance quality, availability, and accessibility across the two systems. The Tennessee Early Learning Developmental Standards (TN-ELDS) are required to be used in all programs serving children birth to age 5. In addition, a shared system of professional development training is offered across both the VPK and child care services systems. By using the same standards and professional development supports, the VPK and child care services support systems are able to stretch resources to support a greater number of providers to expand the availability of childcare.

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

The State Pre-K program is required to meet a minimum of 5.5 hours per day for a minimum of 180 days (school year). In collaborative programs between child care and State Pre-K, the Pre-K funds pay for the instructional day of 5.5 hours for a minimum of 180 days of the school year. Child care provides before care, after care, and summer child care services.

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

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

Services to eligible families/children were not reduced as a result of these Pre-kindergarten expenditures. The Lead Agency does not currently have a waiting list for child care assistance.

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

The State Pre-K program is required to meet a minimum of 5.5 hours per day for a minimum of 180 days (school year). In collaborative programs between child care and State Pre-K, the Pre-K funds pay for the instructional day of 5.5 hours for a minimum

of 180 days of the school year. Child care provides before care, after care, and summer child care services.

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

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

Collaboration is a cornerstone of the Tennessee Child Care Services and Voluntary Pre-K (VPK) systems. Collaborative structures like the TN Young Child Wellness Council and Tennesseans for Quality Early Education provide a forum to explore initiatives that enhance quality, availability, and accessibility across the two systems. The Tennessee Early Learning Developmental Standards (TN-ELDS) are required to be used in all programs serving children birth to age 5. In addition, a shared system of professional development training is offered across both the VPK and child care services systems. By using the same standards and professional development supports, the VPK and child care services support systems are able to stretch resources to support a greater number of providers to expand the availability of childcare.

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

i. If known, what percent of funds used to meet CCDF MOE also is used to meet TANF MOE requirements? 20% of CCDF MOE is used to meet TANF MOE

## 1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-

private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

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

The Lead Agency works with the Department of Children's Services (DCS) to allow DCS personnel to make direct arrangements with the Lead Agency for child care assistance for children in foster care or protective services.

The lead agency also maintains limited access to the child abuse registry maintained by DCS for the purposes of completing in state abuse registry checks on prospective child care staff.

The Lead Agency works with the Department of Education (DOE) to allow them limited access to the licensing database in order for DOE to enter data about the child care agencies that are regulated by DOE. This enables the information about these agencies to be available to parents and the general public through the "Find Child Care" feature on the Lead Agency's website.

In partnership with the Tennessee State University, the Early Literacy Matters 3-hour Introduction to Literacy: Early Literacy Matters training that was added to the Tennessee Child Care Online Training System which left a significant amount of curriculum that was determined to be best delivered in the Tennessee State University eLearn platform with users who can access some guided instruction. This training was expanded into a 30-clock hour Literacy Orientation, TECTA Early Literacy 30: Books and Beyond.

The Lead Agency established and funded a network of temporary sites in partnership with the YMCA and the Boys & Girls Clubs for the provision of temporary/emergency care for school-aged children of essential workers during the extraordinary circumstances of the COVID-19 pandemic.

In 2020, the Lead Agency partnered with the Community Foundation of Middle Tennessee to



facilitate the processing and distribution of loss of income and operational support grants in response to the COVID-19 pandemic.

The Lead Agency also serves on the State Interagency Coordinating Council (SICC). The State Interagency Coordinating Council for TEIS has established a guiding vision to support the Department of Intellectual & Developmental Disabilities through a statewide comprehensive, coordinated, multidisciplinary, interagency system of early intervention services for infants and toddlers with disabilities and their families in Tennessee. This council is statutorily created and required by law.

The Lead Agency partnered with Governor's Early Literacy Foundation (GELF), formerly known as "Books from Birth" to provide families with the resources to strengthen early literacy skills in children and encourage caregiver engagement around reading. Through this partnership, every age-eligible child entering the child care subsidy program is enrolled into Dolly Parton's Imagination Library. Dolly Parton's Imagination Library, in partnership with GELF, is an early literacy program available to all children from birth to 5 years old living in Tennessee. Once children are enrolled in the program, a new book is mailed to each child every month until he or she turns five. The books are provided to children at no cost to the family and regardless of income. As of September 2020, the Lead Agency's commitment to enroll age-eligible Child Care Certificate Program participants in Dolly Parton's Imagination Library has resulted in enrollment of more than 29,000 children. Each book is high-quality, age appropriate and includes reading comprehension activities and suggestions. To further encourage caregiver engagement around reading, GELF provides literacy resources and reading tips to enrolled families. This partnership provides families and caregivers with additional opportunities to read with their children and engage in literacy-rich experiences.

The Lead Agency collaborates with the Tennessee Department of Health (TDH) regarding provider, parent, and general consumer education focused on safe sleep practices. Raising awareness of parents and providers about safe sleep practices aligns with the Office of Child Care priorities to support child health and safety and aligns with a focus on enhancing the quality of services available for infant populations.

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

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

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

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

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

additional services beyond those required by statute or rule.

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

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

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

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

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

The Tennessee Child Care Resource and Referral Network is a managed network of Child Care Resource and Referral Agencies (CCR&Rs) serving eight (8) geographic areas across Tennessee and offering services to families, child care agencies, and the child care workforce statewide.

CCR&R staff offers families consumer information to identify and better understand the components of high-quality child care as well as answer questions about child care agencies in their geographic areas. For child care agencies, CCR&R staff provides coaching and technical assistance, training, consultation, and supporting materials and resources on such topics that include developmentally appropriate practices, health and safety issues, parent engagement, social/emotional and behavioral health, and best practices across related themes. CCR&R staff also provides child care agencies assistance with program inclusion for children having special needs or on-site consultation problem-solving child care and other health issues. Additionally, the Tennessee Child Care Resource and Referral Network CCR&Rs identify unmet training needs of providers and deliver or facilitate the delivery of resources and training content both online and in person to meet the availability of providers.

The Lead Agency maintains a contract with Signals Centers, Inc. to provide and

administer the Tennessee Child Care Resource and Referral Services. The contract includes such provisions and activities that support children, families, and child care agencies as: -

- Supporting a system of high-quality early care and education for children in Tennessee through the management of the Tennessee Child Care Resource and Referral Network, and providing quality resources, consistent practices, and support for child care agencies that include expertise, training, and technical assistance.
- Maintaining consistency in services to the network in the following areas: health and safety; infant/toddler best practices; family and group child care; center-based childcare; and school-age child care. Services must reflect developmentally appropriate practices around core areas such as: supervision, child guidance, parent engagement/child care consumer education information, child outcomes and kindergarten readiness. Continuous Quality Improvement Plans form the frame work for technical assistance to agencies requiring identification of agency needs, resources needed, assignment of CCR&R staff and other resources within a timeline and required support from the administration of the child care agency.
- Providing prioritized targeted technical assistance in response to referrals from the Lead Agency and partner agencies, and supporting the development of agency continuous quality improvement plans.
- Supporting developmental monitoring and knowledge of development milestones among child care agencies, teachers, and families.
- Ensuring child care agencies receive the most accurate and up-to-date information about the QRIS assessment tool.
- Assisting families, especially among vulnerable populations, with accessing local services. of include developmentally appropriate practices, health and safety issues, parent Collaborating with local community-based organizations to engage with and support the education of families and the general community regarding high-quality child care.
- Developing a statewide initiative to increase outreach and services benefiting homeless populations.
- Promoting the social emotional development and school readiness of children utilizing the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children.
- Conducting outreach and awareness campaigns in collaboration with the Lead

Agency and other partners on such topics as quality child care, accessibility, etc. - Working with families who receive child care assistance to make an informed decision when choosing a child care agency.

- Coordinating with the Lead Agency and other partners to strengthen and improve data to ensure adequate supply of child care exists to sufficiently satisfy demand.
- Assisting the State in responding to state or national requirements to improve childcare quality.
- Developing and maintaining a statewide delivery system for ongoing training in CPR and First Aid that includes the availability of weekend training sessions.
- Creating small business academies to support, strengthen, and improve small business practices among child care providers.

The Lead Agency contracts with Signal Centers, Inc. to manage the Tennessee Child Care Resource and Referral Network. Signal Centers, Inc. is funded through a variety of federal, state, and local agencies including the United Way of Greater Chattanooga, Tennessee's Department of Health, Department of Education, Department of Human Services, Hamilton County Social Services, State of Tennessee Social Services Block Grant (Title XX), local service and community organizations, various fund-raising activities, fees for service, and charitable donations. Signal Centers, Inc. contracts with community-based nonprofit agencies or public institutions to operate five (5) CCR&R agencies and serve eight (8) regional service delivery areas offering free services to families and any child care agencies licensed by the Tennessee Department of Human Services. These CCR&R sites fulfill scopes of services that improve the overall quality of child care, strengthen the training and technical assistance system for the state, and assure quality and consistent practices throughout the Tennessee Child Care Resource and Referral Network.

Signal Centers, Inc. strengthens and further enhances the Tennessee Child Care Resource and Referral Network through the provision of quality coaches who directly support families and child care agencies through Infant-Toddler, Family Engagement, and Health, Safety, and Well-Being specializations.

## 1.8 Disaster Preparedness and Response Plan

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

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

No

Yes

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

The Statewide Child Care Services Emergency Preparedness Plan (CCSEPP) was updated in 2020 as follows:

- Language was added to describe the CCDBG Reauthorization requirements for developing the plan in collaboration with specified entities, including the State Advisory Council on Early Childhood Education.
- The term 'agency', as used in the plan was further defined to refer to any center, family, or group home regulated by TDHS as well as providers of child care participating in the Child Care Payment Assistance/Child Care Certificate Program that may be license-exempt, regulated by the Department of Education, or unregulated Authorized Professionals.
- The Public Information and Legislative Office (PILO) was added to the internal team structure Clarified that the CCSEPP will be reviewed biennially.

- Explained that Emergency-related team lists, including work and home contact information, will be developed and maintained by CCS Central Office and reviewed and distributed annually at the direction of the Child Care Services Leadership Team.
  - Disaster roles and processes were revised to clarify that the Child Care Services Emergency Preparedness Team (CCSEPT) will have contact details for emergency management that includes non-emergency alternatives to 911.
  - Identified licensing Program Supervisors/Regional Managers as the entities to collect and share general information between the local, regional, and state levels.
  - Clarified that information generated from assessments of need will be communicated to the TDHS Emergency Services Coordinator and TDHS Executive Leadership Emergency Preparedness Team members.
  - Added provisions to address the need for temporary care arrangements in circumstances where the overall supply of child care in the community is no longer sufficient.
  - Updated the list of functional team members to reflect the current management structure of the Lead Agency.
  - Added a provision to address the process for determining if any regulations need to be modified/relaxed as part of the response to a disaster in compliance with the CCDF State Plan and subject to approval by the Office of Child Care.
  - Clarified that child care agency emergency preparedness plans must include provisions to address all the elements in the CCCDBG requirements.
  - Revised the specific disaster planning section to include all the CCDBG required elements. Specified that the Tennessee Child Care Serious Injury Incident Report Form should be used to report injured children.
  - Clarified that the facility response actions include deploying accommodations of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- The Child Care Agency Emergency Preparedness Plan Template was also revised to incorporate the Emergency Preparedness Plan Checklist and all the required CCCDBG elements.

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

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

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

[https://www.tn.gov/content/dam/tn/human-services/documents/CCS%20EPP\\_02-2021.pdf](https://www.tn.gov/content/dam/tn/human-services/documents/CCS%20EPP_02-2021.pdf)



## 2 Promote Family Engagement through Outreach and Consumer Education

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

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

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

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

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

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

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

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

Describe:

The Lead Agency takes reasonable steps to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in its services, activities, programs, and other benefits. The policy of Lead Agency is to ensure meaningful communication with persons that experience LEP and their authorized representatives. This policy also provides for communication of information contained in vital documents, including but not limited to, applications for benefits,

client release forms, and civil rights complaint forms. Lead Agency contracts with the Tennessee Foreign Language Institute, a public state agency, and other language services to provide interpretation, translation, and other services needed to comply with this policy without cost to the person being served.

Language assistance is provided through use of competent bilingual staff, contracts or formal arrangements with organizations providing interpretation or translation services, or technology and telephonic interpretation services. All employees receive notice of this LEP policy and procedure, and staff who may have direct contact with LEP persons are provided effective communication techniques, including the effective use of an interpreter and how to engage such services.

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

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

Describe:

The Lead Agency makes reasonable modifications in policies, practices, or procedures when the modifications are necessary to avoid discrimination on the basis

of disability, unless the modification would fundamentally alter the nature of the service, program or activity. The Division of Rehabilitation Services is housed in the Lead Agency and coordinates to support the needs of families and children with disabilities. The Lead Agency, through the Division of Rehabilitation Services, takes appropriate steps to ensure that communication with applicants, participants, and members of the public with disabilities are as effective as communications with others. The Division of Rehabilitation Services furnishes appropriate auxiliary aids and services upon request and where necessary to afford an individual with a disability an equal opportunity to participate in, and receive, a service, program, or activity conducted by the Department.

## 2.2 Parental Complaint Process

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

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

Parents as well as the general public may report violations and/or submit complaints regarding child care agencies through the Tennessee Child Care Complaint Hotline at (800)462-8261 or a planned web-based option for submitting complaints that is not yet implemented. Complaints are typically received via dedicated sources, such as the Child Care Complaint Hotline, the Department of Children's Services, and the Comptroller's Hotline. However, the department will accept complaints from other sources. Complaints can be made via telephone, electronically, in person or in writing. Information about violations/complaints may also be emailed to the Human Services' Webmaster:

<https://www.tn.gov/humanservices/for-families/child-care-services/child-care-report-child->

[care-violations-complaints.html](#) The complainant will be asked for their name and contact information in case additional information is needed. However, complainants may also remain anonymous. The person receiving the complaint will collect as much information as is available. The following information is desired, at a minimum: a) The name and address of the agency; b) specific circumstances of the complaint; c) date and time of the alleged incident; d) full names of all staff and children involved; and e) the location of the alleged incident.

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

Lead Agency Licensing Consultants responsible for monitoring an agency conduct the complaint investigation to determine if it is valid. The exception is a complaint alleging child abuse which is investigated jointly by the Lead Agency and the Department of Children's Services (DCS). In such cases of alleged child abuse, Lead Agency Licensing Program Consultants also investigate the complaint to see if the agency violated any licensing rules but would not determine whether or not abuse occurred.

Upon receipt of a complaint, the assigned Licensing Consultant shall consult with his/her supervisor to determine if additional information is needed and develop an appropriate investigative strategy, including timeframes for an investigation, and utilize Tennessee Department of Human Services Form HS-3038 Investigative Work Plan for this analysis.

-All complaints alleging health and safety violations must be investigated by an unannounced visit.

-Complaints that do not allege health and safety violations will be addressed by telephone or during the next monitoring visit.

The goal of Child Care Services complaint inquiries are to determine if a violation of rules or statute has occurred. The primary factors used to make this determination are:

-Review and analysis of the evidence gathered;

-Witness statements;

- Observations;
- Documentation or lack of required documentation; and/or
- Professional judgment.

Complaints may be made directly to a Licensing staff person in a local county office or made via the centralized Complaint Hotline. Complaints may be made by telephone, in person, electronically, or by mail. The Licensing Consultant completes an investigation of the complaint and enters the results into TLCS. Complaints involving abuse, improper supervision, inappropriate discipline, or injury to a child are also sent to Department of Children's Services and may require a safety plan. All complaints are encoded in the Tennessee Licensed Care System (TLCS) database and maintained indefinitely. Parental complaints about unregulated providers are managed on the local level through the county offices of the Lead Agency.

Currently, all complaints are investigated within thirty (30) business days. However, the policy is being revised to assign a risk level based upon the allegation and a designated response time. High = Immediate-Actual or Imminent Risk of Harm/Injury or Death (response time-within 24 hours), Medium = Major Licensing Violations/Potential Risk of Harm (response time-within 3-5 business days), Low = Minor Licensing Violations (response time-within 10 business days) In the process of determining whether or not a violation of rules or statute has occurred "professional judgment" is needed when evaluating the evidence collected and determining what other actions are needed to make a determination. Sometimes a complaint is beyond the scope of the rules/statute and investigators need to use sound professional judgement to address such situations and make appropriate referrals as needed. The complaint investigation process is the same for license-exempt providers participating in the Child Care Certificate Program, except that the objective is to determine if the complaint is related to any non-compliance with any of the Health & Safety or contractual requirements. Items beyond the scope of the Health & Safety or contractual requirements would be referred to the parent organization (Boys and Girls Club). County offices that received complaints from parents about unregulated providers are generally treated the same as complaints on licensed providers. Issues regarding health and safety are referred to the compliant hotline so the complaint can be investigated by a licensing consultant. The county office also emails the licensing regional manager to ensure that it gets addressed and to advise them that the complaint was referred to the hotline. If the complaint alleges fraud the information is sent to the Compliance and Reliability Unit. The Compliance and

Reliability Unit reviews the information and refers the complaint to Audit for investigation if warranted. The Department of Education completes complaint investigations in thirty days. Complaints related to infant and toddlers require a response within twenty-four hours. The response for all other complaints is seventy-two hours.

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

Complaints may be made directly to a Licensing staff person in a local county office or made via the centralized Complaint Hotline. Complaints may be made by telephone, in person, electronically, or by mail. The Licensing Consultant completes an investigation of the complaint and enters the results into TLCS. Complaints involving abuse, improper supervision, inappropriate discipline, or injury to a child are also sent to Department of Children's Services and may require a safety plan. All complaints are encoded in the Tennessee Licensed Care System (TLCS) database and maintained indefinitely. Parental complaints about unregulated providers are managed on the local level through the county offices of the Lead Agency.

The Department of Education completes complaint investigations in thirty days. Complaints related to infants and toddlers require a response within twenty-four hours. The response for all other complaints is seventy-two hours. Compliant information is entered/stored in the licensing database TLCS.

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

Currently, violations associated with complaints are available on the Lead Agency website under the compliance history tab for the child care agency. However, the full detail of a complaint without violations is maintained within the child care agency electronic case file maintained by the Lead Agency. The general public/parents may submit email or phone inquiries to receive information about complaints. There is no fee associated with making an inquiry. Persons inquiring about complaints on agencies are referred directly to the Licensing

Consultant who is responsible for monitoring the agency. Normally, the Licensing Consultant verbally gives an account of the electronic record that includes the number of complaints, the type of complaint, and whether or not the complaint was validated. If requested, the Licensing Consultant may provide a copy of the complaint information from the electronic record. Extensive public records requests are routed through the office of Public Information and Legislative Office (PILO). As noted, Extensive public records requests are routed through the office of Public Information and Legislative Office (PILO) to ensure that necessary protocols are followed. In this context, extensive generally refers to requests for entire case records, or requests for records for all programs in a given county or region. In instances where the entire case record is requested, steps must be taken to ensure that any protected information is appropriately redacted.

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

The investigation of complaints by the Lead Agency is detailed in Tennessee Department of Human Services Policy 13.03, Investigating Complaints at Child Care Agencies.

### **2.3 Consumer Education Website**

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



local child care and resource referral organizations. It must also include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

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

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

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

The Lead Agency website is designed with most programs accessible from the home page, or within 3-clicks from the homepage. The Child Care Services section has a left navigation menu which lists child care related rules, regulations, and resources in detail. Within that menu all other child care related topics are included. The Lead Agency also promotes resources and information through kidcentraltn.com, a website created by the Governor's Children's Cabinet to pull information from across state government so parents and providers can more easily find what they need. This comprehensive website includes information about children's health, education, development, and support. The website kidcentraltn is consumer friendly. It includes information about the child care certificate program, child care resource and referral centers, the child care quality rating system, and tips for finding the right child care. This website is promoted by multiple departments in Tennessee state government and the Tennessee Commission on Children and Youth. Consumer information is available on both the Lead Agency website (<https://www.tn.gov/humanservices/for-families/child-care-services.html>) and KidCentral TN (<https://www.kidcentraltn.com/>). Families can locate child care providers using the tools on the Find Child Care page of the Lead Agency website. Information about compliance history for each agency is located here as well. The Lead Agency website also includes links to the additional resources found on KidCentralTN. Aggregate information about the number of deaths, serious injuries, and cases of substantiated child abuse are located on the Lead Agency website under the

Reports and Information page: <https://www.tn.gov/humanservices/information-and-resources/tdhs-reports-and-information.html>

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

On the bottom right corner of each web page on the Lead Agency website there is a translate button, which allows the web page to be translated across several dozen languages, powered by Google Translate.

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

The site is designed to be 508 compliant. We attempt to use alt-tags on relevant photos, embed readable PDF documents, and spell out statements that open as a hyperlink so that screen readers and other tools can easily convey what the person with the disability is attempting to open. More information can be found here: <https://www.tn.gov/web-policies/accessibility.html>

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

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

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

<https://www.tn.gov/humanservices/for-families/child-care-services/how-to-become-a-licensed-child-care-provider.html>

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

All licensed child care facilities must receive a minimum of one (1) announced evaluation visit during the licensing year. All areas of the child care licensing rules are reviewed during the re-evaluation visit. Exempt Boys & Girls Clubs that participate in the Child Care Certificate Program receive one announced visit annually. Programs regulated by the Department of Education receive at least one announced and one unannounced visit annually. The monitoring requirements for Department of Education programs are outlined in the Standard for School Administered Child Care Programs 0520-12-01-.03 Program Approval: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20180801.pdf>

Link to visit schedule for DHS Licensed agencies: <https://www.tn.gov/humanservices/for-families/child-care-services/child-care-provider-monitoring-and-inspections.html>

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

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees.html>

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

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/law--policy-and-excludable-charges.html>

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

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

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

<https://www.tn.gov/humanservices/for-families/child-care-services/find-child-care.html>

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

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

Describe

c) Identify what informational elements, if any, are available in the searchable results.

Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

All Licensed Providers

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

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

#### License-Exempt CCDF Center-based Providers

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

#### License-Exempt CCDF Family Child Care Home Providers

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

#### License-Exempt Non-CCDF Providers

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

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

Relative CCDF Providers

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

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

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

d. Other information included for:

- i. All Licensed providers.

Describe

Provider information available on the Lead Agency's website may be accessed through a downloadable spreadsheet as well as basic and interactive search functions, including searches by address, county, and zip code. The information shared is the same for all providers. The information available includes provider name, physical address, mailing address, county, telephone number, provider type, provider star rating, minimum and maximum ages served, capacity, open and close times, date opened, regulatory agency, and regulatory Licensing Consultant name and telephone number. Additional information detailing program, environmental, or accessibility includes: Offers scholarships (Y/N), Offers sliding fee scale (Y/N), Offers multi-child discount (Y/N), Wheelchair Accessible (Y/N), Near public transportation (Y/N)

ii. License-exempt CCDF center-based providers.

Describe

Provider information available on the Lead Agency's website may be accessed through a downloadable spreadsheet as well as basic and interactive search functions, including searches by address, county, and zip code. The information shared is the same for all providers. The information available includes provider name, physical address, mailing address, county, telephone number, provider type, provider star rating, minimum and maximum ages served, capacity, open and close times, date opened, regulatory agency, and regulatory Licensing Consultant name and telephone number. Additional information detailing program, environmental, or accessibility includes: Offers scholarships (Y/N), Offers sliding fee scale (Y/N), Offers multi-child discount (Y/N), Wheelchair Accessible (Y/N), Near public transportation (Y/N)

iii. License-exempt CCDF family child care providers.

Describe

iv. License-exempt, non-CCDF providers.

Describe

Applicable to center based exempt providers regulated by the Department of Education: Provider information available on the Lead Agency's website may be accessed through a downloadable spreadsheet as well as basic and interactive search functions, including searches by address, county, and zip code. The information shared is the same for all providers. The information available includes provider name, physical address, mailing address, county, telephone number, provider type, provider star rating, minimum and maximum ages served, capacity, open and close times, date opened, regulatory agency, and regulatory Licensing Consultant name and telephone number. Additional information detailing program, environmental, or accessibility includes: Offers scholarships (Y/N), Offers sliding fee scale (Y/N), Offers multi-child discount (Y/N), Wheelchair Accessible (Y/N), Near public transportation (Y/N)

v. Relative CCDF providers.

Describe

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

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

- i. Quality rating and improvement system
- ii. National accreditation
- iii. Enhanced licensing system
- iv. Meeting Head Start/Early Head Start Program Performance Standards
- v. Meeting Prekindergarten quality requirements
- vi. School-age standards, where applicable
- vii. Other.

Describe

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

- i. Licensed CCDF providers.

Describe the quality information:

Licensed child care agencies (centers, family homes, and group homes) voluntarily participate in the Child Care Report Card and Star Quality Rating system. The primary considerations that determine a center-based child care provider's Star Quality rating are: Director Qualifications; Professional Development; Parent/Family Involvement; Ratio and Group Size; Staff Compensation; Program Assessment; Developmental Learning, and Child Health and Well-being. The primary considerations that determine a family or group home child care provider's Star Quality rating are: Professional



Development; Parent/Family Involvement; Business Management; Program Assessment; Developmental Learning, and Child Health and Well-being.

ii. Licensed non-CCDF providers.

Describe the quality information:

Same as i. above

iii. License-exempt center-based CCDF providers.

Describe the quality information:

Same as i. above if participating in QRIS

iv. License-exempt FCC CCDF providers.

Describe the quality information:

v. License-exempt non-CCDF providers.

Describe the quality information:

Same as i. above if participating in QRIS

vi. Relative child care providers.

Describe the quality information:

vii. Other.

Describe

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

**by posting a blank checklist used by monitors).**

The reports must be in plain language or provide a plain language summary, as defined by the state or territory, and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports.

Certify by responding to the questions below:

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

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

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

Unfortunately, due to the security features associated with the Find Child Care locator, it is not possible to provide a direct link to a monitoring and inspection report for a specific child care agency. In order to access the information for a particular agency you must first locate the agency on the website. Once the agency is located, there is a direct link for the Compliance History information for that agency. For example, follow the steps below to find the Compliance History information for Community Child Care Services, Inc. in Sumner County at Zip Code: 37075: Go to the Find Child Care page:

<https://www.tn.gov/humanservices/for-families/child-care-services/find-child-care.html> On this page select the "Click here to search by county" link. Next click on "Sumner County" on the state map. Next click on the Zip Code link for 37075. Next scroll down to the "Community Child Care Services, Inc." (agencies are in alphabetical order). Now click on the Compliance History tab associated with the agency to see the information associated with any visits.

The Lead Agency is working on completing a system modernization that will include an eLicensing System that will accommodate the posting of full monitoring reports.

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

Date of inspection

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

Describe how these health and safety violations are prominently displayed:

Additional visit types were added to the system to specifically identify fatalities or serious injuries. All violations are prominently displayed on the compliance history tab on the website.

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

Describe:

Licensing Consultants include a corrective action statement for all violations in the narrative of the case management system that is also displayed on the website under the compliance history tab.

A minimum of 3 years of results, where available.

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

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

See response to 2.3.7 ii above

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

Visit reports must be completed and encoded in the Tennessee Licensed Care System (TLCS) database within five (5) business days as required by Tennessee Department of Human Services Policy Chapter 13 and Child and Adult Care Licensing Policy and Procedures Manual (August 2020). Child Care Licensing field management monitor this process through a review of visit information encoded by assigned staff that ensures information is encoded accurately and timely. Upon the internal approval process, information including date of visit, visit type, date of violation correction,

violations, and statement of corrective action will be posted to the Lead Agency website within twenty-four hours.

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

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

The Lead Agency defines "plain language" as communication that is clear and easily understood by the general public. The concept as related to inspection reports also includes presenting information in a format that contributes to a better understanding of the material.

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

The regulation for posting the results of monitoring and inspection reports identifies three required elements: Date of Inspection Information on Corrective Action Any Health and Safety Violations (including any fatalities and serious injuries occurring at the provider). The format on the website allows the viewer to see visits at a glance and identify any that include violations. An observation narrative is pulled from the licensing system to describe the violation and the narrative includes corrective action statement describing the actions to correct the violation.

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

Providers may contact the Child Care Licensing by phone, email, or in writing to identify report errors that are reviewed by Child Care Licensing field management who will ensure that necessary corrections are completed. This process is applicable to all licensed, regulated, or license-exempt agencies. Inaccuracies could include simple encoding errors such as incorrect spelling of name/address, etc. Such errors would be corrected upon discovery without the need for any formal process. Discrepancies related to violations or a report card rating would first be reviewed by program supervisors to verify circumstances and resolve. A more formal process would generally not be needed to correct errors/inaccuracies.

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

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

Providers may appeal enforcement actions by submitting a request in writing within ten(10) days. Appeals of enforcement actions are heard by a Child Care Board of Review, as required by T.C.A. § 71-3-510 was established to hear the appeals of the denial, revocation or the restriction or limitation of other than summary suspensions of child care agencies licensed by the lead agency. Inaccuracies may be corrected at any time by contacting the Child Care Licensing Office by phone, email, or in writing to identify report errors.

The formal process involving the Board of Review is limited to enforcement actions. Deficiency citations found during monitoring visits would be handled informally via internal review by program administration. During the informal review, information would first be reviewed by field supervisory staff and then forward to management in central office if it could not be resolved at the field level. Violation information is populated on the website based upon information within the licensing database. Corrections would be made within the database by program staff to remove any errant items from the website.

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

Violations are available at the Lead Agency website from July 01, 2013. Corrective action and visit type information were added in 2017. There is no policy for removing reports after a certain amount of time has passed. The Lead Agency is working on completing a system modernization that will include an eLicensing System that will accommodate the posting of full monitoring reports.

**2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted by Lead Agencies on the consumer education website (98.33(a)(5)). The serious incident aggregate data should include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.**

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

a. Certify by providing:

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

The rules of the Department of Human Services require child care facilities to notify the Lead Agency of all serious incidents the same day of the incident. Incidents other than serious injuries may be reported via the Complaint Hotline or mailbox. Once received, this information is entered into the Tennessee Licensed Care System (TLCS). Child care providers are required to submit a completed Child Care Provider Serious Injury Incident Report (via an online form) to the Tennessee Department of Human Services (TDHS) the same day of the incident for any serious injury incident involving a child in the provider's care (including on and off-site activities) where treatment by a medical professional was necessary.

Cases of child abuse and neglect are investigated by the Department of Children's Services (DCS). The Lead Agency receives an investigation summary from DCS related to any allegations of abuse or neglect in licensed child care settings. Any documentation received from DCS that indicate cases of substantiated abuse are aggregated and verified with DCS annually and posted to the Lead Agency website.

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

Rules of the Tennessee Department of Children's Services Child Protective Services Chapter 0250-07-09-.01: (1) "Abuse" exists when a child victim is suffering from, has sustained, or may be in immediate danger of suffering from or sustaining a wound, injury, disability or physical or mental condition caused by brutality, neglect or other

actions or inactions of a parent, relative, guardian or caregiver. (10) "Neglect" means the actions or omissions of a parent, relative, guardian, or caregiver which subject a child victim to actual or threatened harm, including, but not limited to, conduct which leads to a child suffering from any of the conditions listed in the definition of "dependent and neglected child" set out at T.C.A. § 37-1-102(b)(13) (2016 and as amended). (13) "Substantiated" means the classification assigned to an individual determined to be a perpetrator of abuse, severe child abuse, child sexual abuse, or neglect. The term substantiated also encompasses synonymous terms set out in rules, policy, and statute, including, but not limited to, "indicated", "founded", or other terms signifying the individual was determined to be the perpetrator of child abuse or neglect.

iii. The definition of "serious injury" used by the Lead Agency for this requirement.

The department defines injuries where treatment by a medical professional was necessary. If a medical professional determines that no injury occurred, or treatment is unnecessary, the incident is not counted as a serious injury.

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

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

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

<https://www.tn.gov/humanservices/information-and-resources/tdhs-reports-and-information.html>

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

Information about CCR&R is found on the Lead Agency website at:

<https://www.tn.gov/humanservices/for-families/child-care-services/child-care-resource-referral-centers.html> A prominent link to this dedicated page is found on the main Child Care Services page: <https://www.tn.gov/humanservices/for-families/child-care-services.html>

Information about CCR&R and a link to the dedicated page is also included on the Consumer Education Statement: [https://www.tn.gov/content/dam/tn/human-services/documents/Consumer\\_Education\\_Statement\\_4-24-21.pdf](https://www.tn.gov/content/dam/tn/human-services/documents/Consumer_Education_Statement_4-24-21.pdf)

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

Contact information for the Child Care assistance and Child Care Licensing offices are maintained on the website and included in the Consumer Education Statement materials:

Link to Consumer Education Statement: [https://www.tn.gov/content/dam/tn/human-services/documents/Consumer\\_Education\\_Statement\\_4-24-21.pdf](https://www.tn.gov/content/dam/tn/human-services/documents/Consumer_Education_Statement_4-24-21.pdf)

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

<https://www.tn.gov/humanservices/for-families/child-care-services.html>



<https://www.kidcentraltn.com/>

## 2.4 Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

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

The majority of information for parents, the general public, and child care providers is shared through the Lead Agency website and partner websites to include but not limited to the following:

<https://www.tn.gov/content/tn/humanservices.html>

<https://www.tn.gov/humanservices/for-families/child-care-services.html>

<https://www.kidcentraltn.com/>

Information is also made available through written materials placed at county DHS offices or direct communication for individuals without internet access. Website resources are often grouped under a heading that identifies the targeted audience. The Lead Agency is exploring the possibility of a statewide media campaign to raise awareness about the importance of quality child care services and supports available to families.

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

a. Temporary Assistance for Needy Families program:

Temporary Assistance for Needy Families (TANF): Parents are informed about the website and TANF eligibility by Child Care Certificate Specialists during child care eligibility and redetermination visits. Families are also given brochures that provide information on the TANF requirements, services, and contact information. Brochures are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information on TANF to families. <https://www.tn.gov/humanservices/for-families/families-first-tanf.html>

b. Head Start and Early Head Start programs:

Head Start / Early Head Start: Parents are informed about the website and eligibility by Child Care Certificate Specialists, during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.kidcentraltn.com/program/early-head-start-ehs.html>  
<https://www.kidcentraltn.com/education/preschool/head-start.html>

c. Low Income Home Energy Assistance Program (LIHEAP):

Low Income Home Energy Assistance Program: Parents are informed about the website and eligibility by Child Care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide

information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.kidcentraltn.com/program/low-income-home-energy-assistance-program--liheap-.html>

d. Supplemental Nutrition Assistance Programs (SNAP) Program:

Supplemental Nutrition Assistance Programs: Parents are informed about the website and eligibility by Child Care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.tn.gov/humanservices/for-families/supplemental-nutrition-assistance-program-snap.html>

e. Women, Infants, and Children Program (WIC) program:

Women, Infants, and Children (WIC) Program: Parents are informed about the website and eligibility by Child care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.tn.gov/health/health-program-areas/fhw/wic.html>

f. Child and Adult Care Food Program(CACFP):

Parents are informed about the website and eligibility by Child care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given information on the requirements, services, and contact information. Families are also given information about CACFP at the participating center when they enroll. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.tn.gov/content/tn/humanservices/children/dhs-nutrition-programs/child-and-adult-care-food-program.html> <https://www.tn.gov/humanservices/children/dhs->

[nutrition-programs/learn-about-the-summer-food-service-program.html](https://www.tn.gov/education/finance-and-monitoring/idea.html)

**g. Medicaid and Children's Health Insurance Program (CHIP):**

TennCare Medicaid: Parents are informed about the website and eligibility by Childcare Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families.

<https://www.tn.gov/tenncare/members-applicants/eligibility/tenncare-medicaid.html>

Children's Health Insurance Program (CoverKids): Parents are informed about the website and eligibility by Child care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families. <https://www.tn.gov/coverkids.html>

**h. Programs carried out under IDEA Part B, Section 619 and Part C:**

Individuals with Disabilities Education Act: Parents are informed about the website and eligibility by Child Care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information. Brochures and resources are available in English and Spanish. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families.

<https://www.tn.gov/education/finance-and-monitoring/idea.html>

<https://www.tn.gov/education/student-support/special-education/special-education-section-619.html>

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

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

**Description:**

Information is made available in partnership with the Kidcentral website which serves as a statewide clearing house (for multiple state departments) for information for families, providers, and the general public. The website is organized according to the following four areas: health, education, development, and support. It is designed to be a resource for parents, any entities that work with children, or child advocates. It includes information on but not limited to topics such as: Nutrition, checkups, insurance, safety, oral health, physical activity, mental & emotional health, reading, school readiness, K-12, special needs, preschool, community & after school care, child development according to the age of the child, crisis services for children, child care, life skills, child support, and adoption/foster parenting. <https://www.kidcentraltn.com/>

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

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

**Description:**

The Lead Agency's policy is to directly support social-emotional behavioral health for providers and families through contracted services provided by Child Care Resource & Referral (CCR&R) and the Association of Infant Mental Health Tennessee (AIMHiTN). Services include providing support for educators supporting social and emotional development in the classroom modeling best practices using such resources as the *Pyramid Model*, *Conscious Discipline*, and *Building Strong Brains* and promoting age-appropriate social emotional development and school readiness of children utilizing the *Pyramid Model*. Contracted services also include providing reflective supervision training, consultation, and support for Lead Agency staff and partners. This training is centered around reflective practices and increases the capacity of staff and partners to strengthen high quality services and positive outcomes in children and families. These services also support the CCR&R Network team of Inclusion Quality Coaches to address the challenges of including children with disabilities in early child care settings and supports the creation of tools and resources by the CCR&R Network for child care agencies as well as parents and families for providing meaningful care and education including but not limited to:

- Autism;
- Neonatal abstinence syndrome;
- Significant behavior disorders;
- Communication needs;

- Physical disabilities of all types;
- Developmental delays;
- Medical conditions; and
- Co-occurring disorders.

Provisions also support the collaborative development and delivery of emergency preparedness consultations, trainings, and/or technical assistance with Lead Agency staff and partners emphasizing trauma-informed practices for early childhood educators and child care agencies.

The primary means of sharing information about social-emotional behavioral health with families, providers, and the general public is via making the information available on the consumer education websites that includes the Child Care Services site and Kidcentraltn ( <https://www.tn.gov/humanservices/for-families/child-care-services.html> <https://www.kidcentraltn.com/>). Information about the websites is shared through the consumer education statement, provider news briefs, and verbally during family engagement opportunities.

**Families:**

- Through web materials such as those on kidcentraltn.com
- The Kidcentraltn.com website includes a number of resources regarding the social-emotional/behavioral and early childhood mental health of young children.
- Positive Action - The Positive Action Prevention Program is an evidence-based substance abuse prevention program. The program addresses social, behavioral, and academic performance, and core risk factors related to self-esteem, self-efficacy and overall risk-related behaviors of children and adolescents. The program is provided in schools and other community settings.
- Infant and Early Childhood Mental Health – <https://www.kidcentraltn.com/program/positive-action>
- Early Connections Network - The Early Connections Network (ECN) is a System of Care(SOC) for children from birth - 5 years of age with social, emotional and behavioral needs and for their families. ECN brings together families, caregivers, teachers, providers, governmental agencies and supports to improve access to quality care for those with mental health challenges and to prepare children for school and for life. ECN has a special focus on working with the children and families of military service members and veterans. <https://www.kidcentraltn.com/program/early-connections-network>

**Agencies:**

-The Keeping Kids Safe Curriculum was designed to assist agencies in providing the most effective program possible - one that children will enjoy and understand. Research has established that children can be given the tools and knowledge to be safer. Because of this, the purpose of this safety curriculum is to improve the knowledge, self-confidence, and assertiveness skills of children thereby:

- Promoting disclosure of victimization
- Enhancing communication between parents and children about personal safety - Reinforcing adult supervision and protection - Assisting children in learning to identify adults they can trust who can help them with problems too big for them to handle alone.

[https://www.tn.gov/content/dam/tn/human-services/documents/keeping\\_kids\\_safe\\_content\\_updated\\_wdraft\\_cover.pdf](https://www.tn.gov/content/dam/tn/human-services/documents/keeping_kids_safe_content_updated_wdraft_cover.pdf).

**General Public:**

-Through web materials such as those on kidcentraltn.com. The kidcentraltn.com website includes a number of resources regarding the social- emotional/behavioral and early childhood mental health of young children.

-Positive Action - The Positive Action Prevention Program is an evidence-based substance abuse prevention program. The program addresses social, behavioral, and academic performance, and core risk factors related to self-esteem, self-efficacy and overall risk-related behaviors of children and adolescents. The program is provided in schools and other community settings.

-Infant and Early Childhood Mental Health– <https://www.kidcentraltn.com/program/positive-action>

-Early Connections Network - The Early Connections Network (ECN) is a System of Care(SOC) for children from birth - 5 years of age with social, emotional and behavioral needs and for their families. ECN brings together families, caregivers, teachers, providers, governmental agencies and supports to improve access to quality care for those with mental health challenges and to prepare children for school and for life. ECN has a special focus on working with the children and families of military service members and veterans.

<https://www.kidcentraltn.com/program/early-connections-network>

**Partners:**

-Tennessee Voices for Children is a statewide and national source of referral, support, and



advocacy for families and the systems that serve them. Through the Statewide Family Network and its other ten main programs, the organization informs, supports, and assists parents and providers statewide. The Lead Agency partners with TVC along with other public and nonprofit agencies under Team TN to support early childhood mental health services and programs for early care and child care agencies about social, emotional, and behavioral health and well-being. <http://www.tnvoices.org>

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

The child care licensing rules for licensed child care centers, group homes, and family homes includes requirements for having a written expulsion policy. Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01:

(13) The agency shall have a written expulsion policy.

(a) The policy shall be: Clearly articulated to staff and parents; Developmentally appropriate and consistent; and Non-discriminatory.

(b) Other options shall be considered prior to expulsion, such as but not limited to reducing the number of days or amount of time the child may attend, or if applicable, referrals to the Center on the Social and Emotional Foundations for Early Learning (CSEFEL), Early Intervention System, Individuals with Disabilities Education Act (IDEA). (Note: The reference to CSEFEL is no longer applicable and will be removed from the rules.)

(c) Procedures shall be developed to allow for a planned transition of a child to another program if expulsion must occur.

(d) Aggregate data that includes reasons for expulsions shall be maintained and reported to the Department annually.

In addition, the Tennessee Department of Human Services Early Childhood Expulsion and Suspension Policy Statement was developed as a resource for all licensed agencies and non-licensed agencies (that participate in the Child Care Certificate Program):

## **Purpose**

The Tennessee Early Childhood Expulsion and Suspension policy statement is aligned with the Child Care Development Block Grant Reauthorization Act of 2014 to prevent, reduce, and eliminate suspension and expulsion in early care and educational settings.

High quality child care and early learning programs are important to preventing suspensions and expulsions in the early learning setting. It is recommended that programs focus on fostering the social and emotional health of children. Early childhood education programs are responsible for creating positive learning environments that focus on preventing expulsions and suspensions, encouraging partnerships between programs and families to support healthy development, and ensuring fairness, equity, and continuous improvement to support children's social, emotional and behavioral health.

## **Definitions**

Expulsion – The permanent dismissal of a child from the assigned early childhood setting for disciplinary purposes.

Suspension- The temporary removal of a child from the assigned early childhood setting for disciplinary purposes.

Social Emotional and Behavioral Health – The child's developing capacity to form secure relationships, experience and regulate emotions and explore and learn.

Challenging Behavior – Any repeated pattern of behavior, or perception of behavior, that interferes with or is at risk of interfering with optimal learning or engagement in pro-social interactions with peers and adults.

## **Recommendations**

Develop and implement policies that promote social emotional health to prevent, limit and eliminate suspensions and expulsions in early learning childcare settings.

Invest in professional development, training and education to prepare and develop educators so that they are equipped to support children's social and emotional health.

Identify and adopt specific strategies to include positive behavior interventions and discipline and guidance practices to effectively manage challenging behaviors in the early learning setting.

Research best practices on classroom management techniques in order to assist educators in developing and implementing effective and intentional techniques.

Provide opportunities for family engagement activities such as but not limited to parent teacher conferences, parent meetings and developmental monitoring and screenings to allow educators, parents, and partners to develop strong partnerships and healthy support systems.

Provide parent resources to give parents additional information about community supports such as, but not limited to brochures, handouts, and websites, on a variety of topics such as child development, social and emotional health, early mental health counselors, developmentally appropriate behavior management, support groups, family activities, etc.

Develop and implement a means of documenting efforts to reduce and prevent challenging behaviors; examples include teacher observations, teacher and classroom modifications, daily progress reports, parent conferences, consults with early mental health professionals.

Written policies should be communicated to parents and classroom expectations for positive behavior and consequences should be communicated to children and parents.

### **Children with Unique Needs and Challenging Behaviors**

Early childhood programs are responsible for creating environments that promote children's social, emotional, and behavioral health. According to the U.S. Department of Health and Human Services early childhood prevention and discipline practices should be used as learning opportunities to guide children's appropriate behavioral development.

The following outlines developmentally appropriate social, emotional, and behavioral health promotion practices in the early childhood and child care environment.

- Forming strong, supporting, and nurturing relationships with children and families including valuing of cultural diversity.

- Reinforcing children's desired behaviors and implementing logical, non-punitive consequences that is consistent and developmentally appropriate for challenging behaviors.

- Paying distinct attention to the developmental appropriateness of both behavioral

expectations and consequences for challenging behavior, given the substantial developmental and experiential differences among children birth through five years of age.

## **Resources**

[https://www.ecmhc.org/tutorials/social-emotional/mod1\\_0.html](https://www.ecmhc.org/tutorials/social-emotional/mod1_0.html)

<http://challengingbehavior.fmhi.usf.edu/do/training.htm>

<https://www.tn.gov/education/early-learning/tennessee-early-intervention-system-teis.html>

<https://aimhitn.org/>

The Lead Agency also provides an Early Childhood Expulsion and Suspension Policy template to assist agencies in creating their personal document:

## **Sample Policy**

High quality child care and early learning programs are important to preventing suspensions and expulsions in the early learning setting. Early childhood education programs are responsible for creating positive learning environments that focus on preventing expulsions and suspensions, encouraging partnerships between programs and families to support healthy development, and ensuring fairness, equity and continuous improvement to support children's social, emotional and behavioral health.

It is recommended that early childhood programs focus on fostering social-emotional development, appropriately responding to challenging behaviors by incorporating preventive guidance, discipline practices and policies before ever considering expulsion or suspension from early childhood programs.

## **Guidance for Prevention of Expulsion and Suspension**

In an effort to prevent expulsion and suspension of children, this agency shall adopt the following, in policy and practice and in a consistent and non – discriminatory manner:

Use developmentally appropriate practices that provide for stimulating and interactive learning environments, diversity, age appropriate expectations, small group activities, teachable moments and a knowledge of research-based evidence and best practices in child development and early learning and education.

Invest in professional development, training, and education to ensure educators have the

competencies to support children's social and emotional health.

Develop and implement classroom schedules that meet the needs of the children. Adapt learning environments to promote healthy social interactions with others.

Develop healthy and nurturing relationships with children. Develop strong partnerships and relationships with parents.

Develop and implement classroom expectations that are developmentally appropriate, clear and consistent.

Provide opportunities family engagement.

Ensure fairness and equity.

### **Other Options Prior to Expulsion and Suspension**

Prior to the expulsion or suspension of any child from this program, the staff and director will follow these guidelines:

Identify and engage mental and behavioral health consultants and community resources after obtaining parent permission.

Reduce the number of days or amount of time in care for a specified amount of time (This option is only used as a last resort prior to expulsion. It is not intended to be an option used on the front end to address a situation.)

Conference with parents to discuss positive behavior interventions and development of goals.

Document efforts to prevent and reduce expulsion.

Provide reasonable accommodations.

### **Transition Procedures**

If an expulsion must occur and the child care facility has exhausted all other options, the

child care agency will assist the child and family in transitioning to another program by identifying and engaging mental health consultants and community resources to assist in determining the most appropriate placement for the child. This child care facility will collaborate with parents / guardians to utilize appropriate referrals and community resources to assist in securing an appropriate placement for the child.

## **Resources**

<https://centerstone.org/>

<https://www.kidcentraltn.com/support/full-family-support/regional-intervention-program-helps-families-work-through-challenging-behavior-.html>

<https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis.html>

<https://tnvoices.org/>

<https://tnstep.org/>

<https://aimhitn.org/>

<https://www.parentcenterhub.org/>

<https://sites.ed.gov/idea/>

<https://www.cdc.gov/parents/>

<https://www.pyramidmodel.org/>

<https://challengingbehavior.cbcs.usf.edu/>

<https://www.tn.gov/behavioral-health/support-for-families.html>

<https://pgcpsfamily.org/parent-toolkit/>

## **Communication**

The agency's expulsion and suspension policy will be clearly communicated to all staff and parents of enrolled children.

Employees - The Expulsion and Suspension Policy will be incorporated into the employee / staff handbook and training practices. The agency Director will explain suspension and expulsion policies to all current staff and any new staff. All existing staff and any new staff are required to be knowledgeable of the policy and will sign a statement acknowledging they have received and read the agency's Expulsion and Suspension Policy.

Parents / Guardians – The Expulsion and Suspension policy will be incorporated into the parent handbook. Within thirty (30) days of adopting the policy, the Director shall disseminate and review the policy with parents / guardians of all currently enrolled children. A copy of the

policy will be disseminated and reviewed with newly enrolled children upon enrollment. All parents / guardians will sign a statement acknowledging they have received and read the agency's Expulsion and Suspension policy.

Parent Acknowledgement I, the parent / guardian of

\_\_\_\_\_ Child's Name acknowledge that the Expulsion and Suspension Policy was explained to me and I have read and received a copy of the Expulsion and Suspension Policy.

\_\_\_\_\_ Parent

Signature Date

The CCR&R will support child care providers in the implementation of these policies and other related activities through its health, safety, and well-being coaches.

The Lead Agency has also partnered with the Association of Infant Mental Health in Tennessee (AIMHiTN) to provide programs and services to support educators and the infant, early childhood, and family childcare workforce that include:

- Professional Development
  - Training & Technical Assistance
  - Infant Mental Health Endorsement® support for CCDF partners and childcare staff
- Reflective Practice
  - Reflective Supervision/Consultation for staff within the Child Care Resource & Referral Network (CCR&R)
  - Training/Technical Assistance
- Community Engagement
  - Outreach
  - Information & Referral to infant and early childhood mental health resources via a resource mapping project
- Emergency Preparedness/Trauma & Crisis Response

## [2.5 Procedures for Providing Information on Developmental Screenings](#)

Lead Agencies are required to provide information on developmental screenings to parents, the general public and, when applicable, child care providers. Information should include: Existing resources and services that the state can use in conducting developmental screenings and providing referrals to services for children who receive child care assistance. Lead Agencies

must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). This information about the resources can include the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)). Information on developmental screenings, as other consumer education information, should be accessible for individuals with limited English proficiency and individuals with disabilities.

### **2.5.1 Certify by describing:**

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

The Lead Agency collects information about existing resources and services available for conducting developmental screenings from the Tennessee Department of Health through monthly informational meetings and disseminates this information to all licensed agencies and non-licensed agencies that serve applicable populations and participate in the Child Care Certificate Program, as a resource to share with families. This information is also shared with CCDF parents through our Child Care Certificate Program Specialists during intake eligibility and redetermination. The information is also made available in Spanish, Somali, and Arabic.

Parents are also informed that if they have concerns or questions about a child's development and are interested in developmental screening, they can contact their child's pediatrician, local Health Department, <https://www.tn.gov/health/health-program-areas/localdepartments.html> , or their local TEIS (Tennessee Early Intervention System) <https://www.tn.gov/education/early-learning/tennessee-early-intervention-system-teis.html>, and for children 3 years and older, they can contact the School-Based Support Services, <https://www.tn.gov/education/early-learning/school-based-support-centers.html> of the local school system. Information about Developmental Monitoring and Screening, for providers and parents can be accessed through the following links shared with all



potential families and providers:

Milestone Moments - Learn the Signs. Act Early

[https://www.cdc.gov/ncbddd/actearly/pdf/parents\\_pdfs/milestonemomentseng508.pdf](https://www.cdc.gov/ncbddd/actearly/pdf/parents_pdfs/milestonemomentseng508.pdf)

Developmental Milestones Checklist

<https://www.cdc.gov/ncbddd/actearly/milestones/index.html>

Learn More About Your Child's Development: Developmental Monitoring and Screening

[https://www.cdc.gov/ncbddd/actearly/pdf/parents\\_pdfs/developmentalscreening.pdf](https://www.cdc.gov/ncbddd/actearly/pdf/parents_pdfs/developmentalscreening.pdf)

Content on the Lead Agency website is Section 508 compliant and accessible via JAWS to facilitate access for individuals with disabilities. The website also includes multiple contact options if additional assistance is needed, including maintaining general contact information, a dedicated customer service phone number, and a customer inquiry form. The Lead Agency makes reasonable modifications in policies, practices, or procedures when the modifications are necessary to avoid discrimination on the basis of disability, unless the modification would fundamentally alter the nature of the service, program or activity. The Division of Rehabilitation Services is housed in the Lead Agency and provides support to other programs to accommodate the needs of families and children with disabilities as they access those programs. The Lead Agency, in consultation with the Division of Rehabilitation Services, takes appropriate steps to ensure that communication with applicants, participants, and members of the public with disabilities are as effective as communications with others to afford an individual with a disability an equal opportunity to participate in, and receive, a service, program, or activity conducted by the Department.

The following additional resources are shared with Parents and are available at [kidcentral.com](http://kidcentral.com) and [TennCare](http://TennCare):

Detailed information on developmental screening services is available at:

<https://www.kidcentraltn.com/development/0-12-months/newborn-screening.html>

<https://www.kidcentraltn.com/search-results.html?q=screenings+beyond+12+months>

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C.

1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). Information about available services are maintained on the Child Care Services - Resources for Parents page on the lead agency website. The section includes links to more information on scheduling screenings and screening locations that include Kidcentraltn, TennCare Kids, and CoverKids. Information on consumer education topics including screenings is provided to the family by the child care specialist during the time of eligibility determination.

<https://www.tn.gov/humanservices/for-families/child-care-services/resources-for-parents.html>

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

A Resource list is given to parents during the intake process. Parents are informed about the website and eligibility by Child Care Certificate Specialists during their child care eligibility and redetermination visits. Families are also given brochures that provide information on the requirements, services, and contact information for accessing developmental screenings. Brochures and resources are also made available in languages other than English. The Child Care Resource and Referral (CCR&R) Family Engagement Quality Coaches also provide resources and information to families.

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

The information provided to parents upon intake and renewal includes contact information that parents can use to schedule screenings.

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

Child care providers will receive training and technical assistance on developmental monitoring and screening by CCR&R Statewide Infant Toddler Specialist. The available dates for training and professional development will be made available to all providers through the CCR&R professional Development training calendar. Although there is not a single training on the specific subject within TCCOTS, it is referenced within various

trainings. An example is the training: Children with Disabilities: Working with Children and Families (Tennessee). This training includes references to the early intervention system in TN and the importance of observation and assessment for developmental milestones (and screening would be the first step in developmental monitoring and observation). Generally, child care providers receive training on developmental monitoring and screening as part of broader topics, including children with special needs or observation and assessment. Information about developmental screenings is made available during TECTA Orientation and referenced when generally speaking about child development. Sometimes information might be available when screenings are offered in a community.

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

The Benefits of Developmental Monitoring and Screening for Young Children is available at the Lead Agency website: <https://www.tn.gov/humanservices/for-families/child-care-services/resources-for-parents.html>

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

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

### **2.6.1 Certify by describing:**

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

The Lead Agency created a consumer education statement that is accessible via the

website. A companion handout was created for the Child Care Certificate Program to distribute to families that outlines information on the website and includes phone contact details for the Child Care Resource & Referral, Child Care Licensing, and Child Care Certificate Program offices. The handout is designed to enable the parent to locate the information on the website or contact the applicable office to get the information by phone if they do not have internet access. In addition, the Lead Agency also created a Child Care Certificate Program Fact Sheet to help communicate information about the available types of child care payment assistance.

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

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

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

[https://www.tn.gov/content/dam/tn/human-services/documents/Consumer%20Education%20Statement%20Edited%20July\\_August%202019.pdf](https://www.tn.gov/content/dam/tn/human-services/documents/Consumer%20Education%20Statement%20Edited%20July_August%202019.pdf)

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

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

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

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

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

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

## 3.1 Eligible Children and Families

### 3.1 Eligible Children and Families

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

#### **3.1.1 Eligibility criteria: Age of children served**

a) The CCDF program serves children

from 6 Weeks

(weeks/months/years)

through 12

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

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

No

Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: The Lead Agency policy definition is: Physical or mental fitness means that an individual is

fit for employment and does not suffer from any disability which would prevent his/her being gainfully employed. (A) A child with a disability, as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); (B) A child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.); (C) Child who is less than 13 years of age and who is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); and (D) A child with a disability, as defined by the State.

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

No.

Yes

and the upper age is 18

(may not equal or exceed age 19)

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

i. "residing with":

The Lead Agency uses the TANF definition which is to be eligible to receive child care benefits, a child must live in a place of residence maintained by a specified relative(within the 5th degree) as his or her home and the home of the child. This same individual must have care and control of the child. A relative is considered to have care and control of child when he/she has the major responsibility for parental obligations of day-to-day care, support, supervision and guidance for the child. The Lead Agency also utilizes the non-TANF definition, which provides as follows: In order for a child to be eligible to receive child care benefits they must be residing with a parent/guardian that meets the following criteria: A biological or adoptive parent, relative or individual with legal custody to the child who:

- Provides a home for the child, and
- Exercises primary responsibility for care/control, and
- Is responsible for providing financial support, and
- Is included in the household (HH) unit

ii. "in loco parentis":

The Lead Agency TANF definition of in loco parent is a caretaker within the 5th degree of relationship to be eligible for assistance.

### 3.1.2 Eligibility criteria: Reason for care

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

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

The Tennessee program aligns its definition with the TANF program. For individuals receiving TANF cash assistance, any TANF-countable activity per the State's Work Verification Plan qualifies as "work" for the purposes of receiving child care assistance. Thirty hours of paid work per week, including self-employment and/or education and training hours, must be met to receive post-TANF cash child care assistance. Work that does not meet the federal minimum wage requirement is allowed, but the "countable" hours per week are determined by dividing the gross weekly income by the federal minimum wage.

For the post-TANF population, the following education and training hours can be counted: Class hours in any public school, Tennessee Board of Regents(TBR) school (including Internet courses), or accredited private institution; Non-paid work performed in college service learning or volunteer programs; Internship hours; Laboratory hours; Tutoring hours received or provided by the participant; and Clients participating in educational activities will be allowed to count supervised homework/study time and one hour of unsupervised homework/study time for each hour of class time.

Supervised homework/study time must be verified and documented to be countable toward educational training hours. The total countable homework/study time may not exceed the hours required or advised by the educational program.

Non-TANF Child Care: To be eligible for Non-TANF Child Care, the parent/guardian must comply with at least one of the following work and/or education requirements:

1. The Parent/Guardian must be employed no less than thirty (30) hours per week, enrolled in a post-secondary education activity combined with employment or enrolled in a full-time post-secondary education program.

a. Parent/Guardian enrolled in post-secondary education programs must maintain full-



time student status based on the definition of full-time status by the institution.

b. Parent/Guardian enrolled in graduate programs may count up to six (6) hours toward the work requirement with verification from the institution. An additional hour for each course up to two (2) hours can be counted as study time for a combined maximum of eight (8) hours.

2. In a two-parent household, both parents must meet one of the following criteria:

a. Both parents employed at least thirty (30) hours per week.

b. One parent employed at least thirty (30) hours per week with the second parent attending a post-secondary education program either full-time or part-time.

c. Both parents enrolled in post-secondary education; one must be attending full-time as defined by the institution.

d. One parent is meeting the thirty (30) hour per week work requirement and the second parent is disabled and cannot meet the needs of the child. The parent with the disability may qualify with verification of the disability.

3. Parent/guardian enrolled in an approved training or workforce development program.

4. Teen Parent/guardian enrolled and attending an approved secondary education program.

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

See response in i. above.

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

See response in i. above.

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

See response in i. above.

### 3.1.2 Eligibility criteria: Reason for care

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

Yes

No,

If no, describe the additional work requirements.

### 3.1.2 Eligibility criteria: Reason for care

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

No.

Yes. If yes:

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

The child welfare agency (Department of Children's Services) determines eligibility for this category of assistance, and the Lead Agency functions as the point of entry for children in protective services to receive child care services. Effective April 1, 2019, the Lead Agency began funding child care payment assistance for children in state custody.

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

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

No

Yes

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

No

Yes

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

No

Yes

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

No

Yes

### 3.1.3 Eligibility criteria: Family Income Limits

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

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

The State Agency defines the following sources as countable income:

- Gross Wages or Salary
- Net Income from Non-Farm Self-Employment
- Net Income from Farm Self-Employment
- Social Security
- Dividends, Interest, Income from Estates or Trusts, from Net Rental Income or Royalties
- Public Assistance or Welfare Payments, Pensions and Annuities, Unemployment Compensation, Worker's Compensation, Alimony, Child Support, Veterans Pension, Education and Training Stipends received directly by the student or to cover living expenses.

b. Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (i) and (ii) based on maximum eligibility at initial entry into CCDF. Complete columns (iii) and (iv) only if the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. If the income eligibility limits are not statewide, please

complete the chart below using the most populous area of the state or territory (defined as the area serving highest number of CCDF children) and respond to c. below the table.

	(i)	(ii)	(iii)	(iv)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (iii) by (i), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	NA	NA	NA	NA
2	4332	3682	2599	60%
3	5352	4549	3211	60%
4	6371	5415	3822	60%
5	7390	6282	4435	60%

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

Income eligibility limits are statewide The Lead Agency utilizes income limits set at the 60th percentile for some categories of care. These income limits were entered in column iii in the table above. Otherwise, income limits are set at the 85th percentile as noted in column ii in the table above.

d. SMI source and year. ACF website LIHEAP Calculations FFY 2020

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

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

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

Income eligibility limits are statewide regardless of population

f. What is the effective date for these eligibility limits reported in 3.1.3 b? 10/1/2020

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

<https://www.tn.gov/content/dam/tn/human-services/documents/Income%20Eligibility%20Limits%20and%20Parent%20Co-Pay%20Fee%20Table%20Fiscal%20year%202020-2021.pdf>

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

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

A declaration statement is included on the Tennessee Department of Human Services Form HS-2853 Parent Agreement Form.

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

No.

Yes.

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

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

a. eligibility determination.

The Lead Agency has a policy on prioritization of need in the event of a waiting list for childcare services. The Lead Agency currently does not have a waiting list. The following groups will be given priority in the event of a waiting list: Homelessness, Children with a Diagnosed Disability, Military

Currently, engaging in job search is only an eligible activity for SNAP E&T or Families First. At initial determination, the individual must meet 30 hour per week work requirement. At redetermination, if not meeting 30 hours per week, the lead agency is

considering allowing a 90 period to seek employment. In collaboration with the State's Workforce Investment Board, the Lead Agency is exploring developing a category of care designed for families who are seeking reemployment as the economy recovers from COVID. There would potentially be a job search component for up to one year for families who meet the 85th percentile of State Median Income, are actively engaged in Reemployment/Job Search Activities, and need child care payment assistance to help with securing employment.

**b. eligibility redetermination.**

The Lead Agency has a policy on prioritization of need in the event of a waiting list for childcare services. The Lead Agency currently does not have a waiting list. The following groups will be given priority in the event of a waiting list: Homelessness, Children with a Diagnosed Disability, Military

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

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

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

Describe:

Authorization of child care services is based on parental choice. Parents who have selected Head Start or Pre-K programs are eligible for before and after care after making an allowance for core hours.

### 3.1.7 Fluctuation in earnings.

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

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

Describe:

Per Tennessee Department of Human Services Policy 11.13, Income Eligibility Determination for Child Care under the authority of Rules of Tennessee Department of Human Services Family Assistance Division Chapter 1240-01-54, Child Care Families First Program:

Regular overtime or seasonal income

Regular income may fluctuate from month to month due to overtime occurring on a regular basis. To produce a representative income, the income statements for the previous two-month period (8 weeks) will be averaged. This is consistent with Family Assistance policy.

## Income from farm and non-farm self-employment

This type of income is usually received on an annual basis. Determine hours worked per week then determine monthly wage: Take gross wage divided by \$7.25 (or the State's current minimum wage). Convert to weekly amount/countable unsubsidized hours of employment.

Example: Annual gross net= \$15,000/52 weeks/ 30 hours = \$9.61per hour Regular income obtained during a portion of the year

Some individuals have regular employment during certain months of the year: schoolteachers, school cafeteria workers, maintenance personnel, and Head Start workers. Some school employees are paid nine months of the year, some are paid 10months, and some receive pay 12 months. The caseworker must determine the pay arrangement a school employee has so that income can be considered in appropriate months. The average monthly income will be considered available during the month itis received for school employees.

For example, a school employee who is paid 10 months of the year would be considered to have income for 10 months and 0 income for 2 months.

In cases where employment has just begun it may be necessary to estimate the income in order to determine eligibility and the parent fee amount.

The Lead Agency accepts an employer's typed statement on company letterhead with employers or human resources representative's signatures describing the client's position, wage and hours.

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



information that the Lead Agency documents and verifies at initial determination and redetermination and describe, at a minimum, what information is required and how often. Check all that apply.

Applicant identity.

Required at Initial Determination

Required at Redetermination

Describe:

Applicant identity is verified at the initial determination. Acceptable forms of identification include: Driver's License; Voter's Registration Card, I-94 Card, or Passport

Applicant's relationship to the child.

Required at Initial Determination

Required at Redetermination

Describe:

For TANF the applicant's relationship to the child is verified at initial determination. Accepted forms of verification include: Birth Certificate, Marriage Certificate, Court Orders, etc. For the child care assistance portion, the birth certificate is collected to verify citizenship for the child and care and control is verified.

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

Required at Initial Determination

Required at Redetermination

Describe:

Birth certificate is used to verify age, immunization records are used to verify identity

Work.

Required at Initial Determination

Required at Redetermination

Describe:

Income verification based upon check stubs or employer statement or tax documents.

Job training or educational program.

Required at Initial Determination

Required at Redetermination

Describe:

The Lead Agency requires that job training or educational status be verified by a written statement from an educational or vocational institution.

Family income.

Required at Initial Determination

Required at Redetermination

Describe:

The Lead Agency requires that job training or educational status be verified by a written statement from an educational or vocational institution until TANF cash assistance ends. For eligibility under the routine child care payment assistance program, income is verified every 12 months with current information in the Family Assistance database or through client-provided verification, or through collateral contacts.

Household composition.

Required at Initial Determination

Required at Redetermination

Describe:

Criteria for this item is described in Tennessee Department of Human Services Policy 11.12, Determining Family Household Size for Child Care Eligibility. The following family members must be included in the household unit: 1. The natural or adoptive parent or parent/guardian. 2. The married spouse of the parent or parent/guardian, if residing in the home. 3. Should a Families First recipient marry during receipt of assistance and elects to exclude the spouse as a household member the following applies: a. The income and resources of the spouse are not included for the first three (3) months of marriage. b. Any children who moved into the home with the spouse at the time the marriage occurred must be considered for addition to the household unit c. If the household closes while the spouse is excluded, the excluded spouse will not be eligible for TCC. The income of the excluded spouse will be counted in the household unit. Any children of the spouse will be included in the

household unit and will be eligible for child care assistance. 4. A second (2nd) parent or alleged parent of the children needing care when he or she is residing in the home, even if unmarried to the parent/parent/guardian. 5. All children needing child care who are residing in the home and for whom the parent/guardian has primary responsibility for care and control and who are related within a specified degree relationship. 6. Any child needing child care residing in the home for whom the parent/guardian or married spouse has primary responsibility for care and control. 7. Any minor siblings to the child needing care, and those siblings over age 18 or under age 19 if the sibling is still attending high school.

Applicant residence.

Required at Initial Determination

Required at Redetermination

Describe:

Verified through lease, utility bill, or identification.

Other.

Required at Initial Determination

Required at Redetermination

Describe:

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

Time limit for making eligibility determinations

Describe length of time:

The Lead Agency notices for redetermination are sent to the family/guardian forty-five (45) days prior to end date. Both initial and redetermination applications are processed within 15 business days upon receipt of a complete application.

Track and monitor the eligibility determination process

Other.

Describe:

An online application option improves efficiency and contributes to the timeliness of the eligibility determination process with minimum disruption to the applicant. The online application was implemented statewide in 2020.

None

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

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

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

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

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

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

a. Identify the TANF agency that established these criteria or definitions: The TANF agency is under the direction of the Lead Agency-Tennessee Department of Human Services.

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

i. "Appropriate child care":

State licensed child care or approved unregulated (unlicensed) child care that meets the needs of the child.

ii. "Reasonable distance":

The distance range as determined on a case by case basis that is deemed to not cause any additional barrier/burden to the customer.

iii. "Unsuitability of informal child care":

Informal child care or "unregulated" child care providers must comply with a health and safety check list and must provide information regarding their criminal background. Certain crimes such as those involving children, violence against another person, or those that are drug related will disqualify a prospective provider. Registers that can be accessed without a fee are checked, such as the Sex Offender Registry.

iv. "Affordable child care arrangements":

Affordable arrangements are determined by the parent's ability to pay for child care available in their area. Parents/caretakers who are unable to locate and/or pay for care will not be penalized for their inability to perform required work activities due to lack of child care.

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

i. In writing

ii. Verbally

iii. Other.

Describe:

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

Families First Child Care Policy 23.25

## 3.2 Family Contribution to Payments

### 3.2 Family Contribution to Payments

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

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

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

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

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest initial or First Tier Income Level where family is first charged co-pay (greater than \$0)	What is the monthly co-payment for a family of this size based on the income level in (a)?	What percentage of income is this co-payment in (b)?	Highest initial or First Tier Income Level before a family is no longer eligible.	What is the monthly co-payment for a family of this size based on the income level in (d)?	What percentage of income is this co-payment in (d)?
1	NA	NA	NA	NA	NA	NA
2	1-433	\$4	<1%	\$3682	\$39	<2%
3	1-535	\$4	<1%	\$4549	\$48	<2%
4	1-637	\$5	<1%	\$5415	\$57	<2%

	(a)	(b)	(c)	(d)	(e)	(f)
5	1-739	\$6	<1%	\$6282	\$66	<2%

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

- i. N/A. Sliding fee scale is statewide
- ii. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart above.
- iii. Describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

c. What is the effective date of the sliding-fee scale(s)? 10-1-20-9-30-21

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

<https://www.tn.gov/content/dam/tn/human-services/documents/Income%20Eligibility%20Limits%20and%20Parent%20Co-Pay%20Fee%20Table%20Fiscal%20year%202020-2021.pdf>

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

Check all that apply under a. or b.

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

Describe:

- vii. Other.

Describe:

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

Describe:

- vii. Other.

Describe:

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

- No.
- Yes, check and describe those additional factors below.

- a. Number of hours the child is in care.

Describe:

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

Describe:

- c. Other.

Describe:



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

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

Describe the policy and provide the policy citation.

The Lead Agency waives co-payments for families first participants by paying the full cost of care up to the full reimbursement rate. Policy 11.39 - Child Care Certificate Program Co-Pay Fees

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

Describe the policy and provide the policy citation.

The Lead Agency waives the co-payments for child care assistance for children in state custody by paying the full cost of care up to the full reimbursement rate. Policy 11.39 Child Care Certificate Program Co-Pay Fees

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

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

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

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

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

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

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

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

**program as income increases, and supports long-term self-sufficiency for families.**

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

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

A. Describe the policies and procedures.

Tennessee offers care categories at different income caps: Categories at the 60th percentile cap (first tier of eligibility) Categories at the 85th percentile cap (second tier of eligibility) At the point of redetermination (after the family has already received a full twelve (12) month eligibility period), if it is determined that the household income for a family at the 60th percentile cap exceeds the 60% level but is below the 85% level, the family's eligibility is extended through a twelve month phase out period. After completing the twelve (12) month phase out period, if the family's income still exceeds the income standard the family will be given a final ten (10) day phase out before care is discontinued. In addition, there are also three categories of care (Smart Steps, Teen Parent, Foster Care/State Custody) in which eligibility is determined up to 85th percentile. Eligibility for these categories will be terminated at the end of the twelve (12) month eligibility period, if the reported income exceeds the 85th percentile after a ten (10)day phase out. The income eligibility for a family of three at this level is up to \$4,549 gross per month.

B. Provide the citation for this policy or procedure.

Tennessee Department of Human Services Child Care Certificate Program Policy Chapter 11

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

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

B. Describe how the second eligibility threshold:

1. Takes into account the typical household budget of a low-income family:
2. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
3. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
4. Provide the citation for this policy or procedure related to the second eligibility threshold:

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

No

Yes

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

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

No.

Yes.

Describe:

### 3.3 Increasing Access for Vulnerable Children and Families

#### 3.3 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to

children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

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

### **3.3.1 Describe how the Lead Agency defines:**

#### **a) "Children with special needs":**

Children with Special needs are defined as: A child with a disability, as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); A child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.); Child who is less than 13 years of age and who is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C 794); and A child with a disability, as defined by the State. Children with Special needs are defined as: A child with a disability, as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401); A child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.); Child who is less than 13 years of age and who is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C 794); and A child with a disability, as defined by the State.

#### **b) "Families with very low incomes":**

Families with very low incomes are defined below and may qualify for subsidy assistance in the order presented: Guaranteed subsidy eligible if receiving TANF and Gross income is tested against a Gross Income Standard which is 185% of the Consolidated Need Standard for the appropriate Assistance Unit size, as listed on the Family Assistance Standards Desk Guide. Families transitioning from TANF benefits may be eligible for an eighteen (18) month Transitional Child Care eligibility period and who meet the work requirement and have income that does not exceed 60% of the State Median Income guidelines. (Tennessee Code Annotated § Title 71-3-104). Child-only guardians who have care and control of a relative child receiving TANF benefits may qualify for child

care payment assistance and who meet the work requirement as defined by the state and income that does not exceed 60% of the State Median Income guidelines. (Tennessee Rules & Regulations 1240-01-54-.01). Teen parents who are enrolled in and attending middle or high school and have income for mandatory household members that does not exceed 85% of the State Median Income guidelines. (Tennessee Rules & Regulations 1240-01-54-.01). Smart Steps Child Care Payment Assistance provides child care support to working families and those pursuing post-secondary education goals and income does not exceed 85% of the State Median Income guidelines.

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

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

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

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

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

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

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

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

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

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

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

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

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

Children with special needs are given the same priority status as non-disabled families with two notable exceptions; increased age limit for children with disabilities and priority status during a waiting list implementation by the Lead Agency.

Families with very low incomes: Guaranteed subsidy eligible if receiving TANF and Gross income is tested against a Gross Income Standard which is 185% of the Consolidated Need Standard for the appropriate Assistance Unit size, as listed on the Family Assistance Standards Desk Guide. Families transitioning from TANF benefits may be eligible for an eighteen (18)month Transitional Child Care eligibility period and who meet the work requirement and have income that does not exceed 60% of the State Median Income guidelines. (Tennessee Code § Title 71-3-104). Child-only guardians who have care and control of a relative child receiving TANF benefits may qualify for child care payment assistance and who meet the work requirement as defined by the state and income that does not exceed 60% of the State Median Income guidelines. (Tennessee Rules & Regulations 1240-01-54-.01). Teen parents who are enrolled in and attending

middle or high school and have income for mandatory household members that does not exceed 85% of the State Median Income guidelines. (Tennessee Rules & Regulations 1240-01-54-.01). Smart Steps Child Care Payment Assistance provides child care support to working families and those pursuing post-secondary education goals and income does not exceed 85% of the State Median Income guidelines.

TANF: Priority is solely based on income limits. Certain child-only cases are eligible for At-Risk Child Only Child Care, if funding is available. Former Families First recipients who are working at least 30 hours a week can receive up to 18 months of Transitional Child Care (TCC) after their cases are closed. There is a co-pay for At-Risk Child Only Child Care and Transitional Child Care. Benefits are time-limited to 60 months in a participant's lifetime for TANF (except transitional and non-working).

### **Direct Supports for Families and Children**

- Exploring expanding age criteria for Smart Steps: Aligning Smart Steps eligibility criteria with the full early childhood age range will enable sustainability of quality care as children grow through the critical period for early literacy. For qualifying children, TDHS is proposing to expand Smart Steps eligibility criteria for a child's age from kindergarten to 8 years old.
- Further exploring targeting support to families experiencing homelessness: Families experiencing homelessness or families at risk of homelessness need access to quality child care in order to regain economic stability. TDHS is proposing to launch a referral process and prioritized category for homeless service providers to connect families to child care payment assistance. This proposed initiative will be supported through partnership with DHS 2Gen agencies, CSBG partner agencies, and TDOE McKinney-Vento programming.
- Exploring opportunities to target supports to families of children with special needs: Parents of young children with disabilities are significantly more likely to experience job disruptions due to lack of access to quality child care that accommodates their children's needs. For children who have been identified with disabilities and special needs, TDHS is proposing a 15% differential above standard reimbursement rates.



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

The following groups are given prioritized consideration by the Lead Agency:

- Children in Foster Care
- Homeless Children
- Children with a Diagnosed Disability
- Military Status of the Adult Parent- currently active duty (i.e. serving full-time) in the U.S. Military or a member of either a National Guard unit or a Military Reserve unit.

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

These groups are coded within the system in order of priority as follows:

- Top Priority: Homeless Children
- Second Priority: Children with a Diagnosed Disability
- Third Priority: Military Status of Adult Parent

### **3.3.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and technical assistance to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3) conduct specific outreach to homeless families (658E(c)(3); 98.51).**

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

The following exceptions were added to the rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01: The agency shall not

admit a child into care until the parent/guardian has supplied the agency with a completed application, valid Tennessee Department of Health Official Immunization Certificates record (for children over two (2) months of age), and a health history. After an initial eligibility determination, children who are homeless and/or children in state custody may receive care prior to providing all required documentation as determined by the Department. Care without documentation of immunizations shall not exceed sixty days. The agency shall maintain written documentation that the parent/guardian performed an on-site visit to the agency prior to the child being enrolled into care and that the agency provided and reviewed parent engagement strategies recognized by the Department with the parent during the required pre-placement visit. Exception: A pre-placement visit is not required for children of homeless families. All children, including related children younger than age nine (9), shall have required records on file before care is provided. Exception: After an initial eligibility determination, children of homeless families and/or children in state custody may receive care prior to providing required documentation as determined by the Department. Exceptions to this immunization record requirement may be made only if: Care for children of homeless families and/or children in state custody is needed before documentation of immunizations can be confirmed. Care without documentation of immunizations for such children shall not exceed thirty days.

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

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

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

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

Note:

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

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

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

Families may receive care for up to 60 days without documentation of immunization requirements .

Provide the citation for this policy and procedure.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01.

ii. Children who are in foster care.

Families may receive care for up to 60 days without documentation of immunization requirements .

Provide the citation for this policy and procedure.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01.

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

The Lead Agency is the licensing authority. Exceptions were added to the child care rules to allow a grace period for immunizations.

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

No.

Yes.

Describe:

### 3.4 Continuity for Working Families

#### **3.4.1 Minimum 12-month eligibility.**

##### 3.4.1 Minimum 12-month eligibility.

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

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

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

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

The Child Care Certificate Program will conduct a redetermination for continued eligibility every twelve (12) months from date of approval. Parent/Guardians are not required to report changes within their twelve (12) month eligibility period. Self-Reported Changes will be acted on if the action benefits the family, unless the income has increased to exceed eighty-five (85) percent of SMI. During the period of time between determinations and re-determinations, if the child met all of the requirements on the date of the most recent eligibility determination or re-determination, the child shall be considered eligible and receive services at least at the same level during that twelve (12) month certification period, regardless of a change in the family income, if that family income does not exceed eighty-five (85) percent of SMI, or regardless of a temporary change in the parent/guardian's work, training or education status. Policy 11.19 notes the 12 month eligibility period.

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

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

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

Describe or define your Lead Agency's policy:

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

Citation:

Tennessee Department of Human Services Child Care Certificate Program Policy Chapter 11. Each program policy includes this provision (11.02, 11.17, 11.18, 11.21

all are being revised).

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

Describe or define your Lead Agency's policy:

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

Citation:

Tennessee Department of Human Services Child Care Certificate Program Policy Chapter 11

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

Describe or define your Lead Agency's policy:

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

Citation:

Tennessee Department of Human Services Child Care Certificate Program Policy Chapter 11

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

Describe or define your Lead Agency's policy:

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment,

education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

**Citation:**

Tennessee Department of Human Services Child Care Certificate Program Policy  
Chapter 11

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

**Describe or define your Lead Agency's policy:**

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

**Citation:**

Tennessee Department of Human Services Child Care Certificate Program Policy  
Chapter 11

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

**Describe or define your Lead Agency's policy:**

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

Citation:

Tennessee Department of Human Services Child Care Certificate Program Policy  
Chapter 11

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

Describe or define your Lead Agency's policy:

Although the family is not required to report changes in hours of work, training or education, if the family does self-report a temporary change that employment, education or training hours have ended, a ninety (90) day Compliance period will begin. If the parent/guardian returns to work, education or training for any number of hours before the end of that ninety (90) day compliance period, eligibility will continue without change without regard to the thirty (30) hour requirement.

Citation:

Tennessee Department of Human Services Child Care Certificate Program Policy  
Chapter 11

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

Self-Reported changes will be acted on if the action benefits the family, unless the income has increased to exceed eighty-five (85) percent of SMI.

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

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

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



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

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

No.

Yes.

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

Currently, engaging in job search is only an eligible activity for SNAP E&T or Families First. At initial determination, the individual must meet 30 hour per week work requirement. At redetermination, if not meeting 30 hours per week, the lead agency is considering allowing a 90 period to seek employment.

In collaboration with the State's Workforce Investment Board, the Lead Agency is exploring developing a category of care designed for families who are seeking reemployment as the economy recovers from COVID. There would potentially be a job search component for up to one year for families who meet the 85th percentile of State Median Income, are actively engaged in Reemployment/Job Search Activities, and need child care payment assistance to help with securing employment.

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

participation in an eligible activity?

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

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

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

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

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

iv. Provide the citation for this policy or procedure.

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

i. Not applicable.

ii. Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

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

B. Provide the citation for this policy or procedure:

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

Provide the citation for this policy or procedure:

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

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

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

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

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

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

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.4.2 of the Plan, they may require families to report a non-temporary change in work, training or educational activities (otherwise known as a parent's eligible activity).

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

No

Yes

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

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

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

Describe:

The Lead Agency does not require a parent/guardian to notify and provide any change in household income or size. The Lead Agency revised policy to include reporting provisions for families that experience temporary changes due to job loss or reduction in work hours. The Lead agency allows the family to report temporary changes that will benefit the family's co-payment structure without undue financial burden.

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

Describe:

Families are required to report changes in home address or phone contact information as required by Tennessee Department of Human Services Form HS-2853 Child Care Certificate Program Parent Agreement.

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

Describe:

The lead agency promotes continuity of care. However, in some circumstances, the family may need to change their provider during the 12-month eligibility period. In these cases, the certificate with the current provider is terminated and a new certificate is issued to the newly selected provider. The provider contract includes a clause that states that funds are subject to availability.

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

- i. Phone
- ii. Email
- iii. Online forms

- iv. Extended submission hours
- v. Postal Mail
- vi. FAX
- vii. In-person submission
- viii. Other.

Describe:

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

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

The Lead Agency allows the voluntary reporting of changes in income and employment as well as residency details, including changes in household size and composition which may result in an adjustment to the parent co-payment based upon the newly reported income and/or program eligibility. The co pay would never be increased during 12 month certificate. If a change is reported that would decrease the co pay, this would benefit the family and is implemented.

ii. Provide the citation for this policy or procedure.

Tennessee Department of Human Services Policy 11.39 Child Care Certificate Program Co-pay Fees

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

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

Lead Agencies are required to have procedures and policies in place to ensure that parents

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

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

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

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

Describe:

The Lead Agency allows parents to submit applications and verification via mail, fax, in person or online. However, a face to face meeting is not required. Telephone interview based upon parent availability are conducted.

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

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

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

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

### 4.1 Maximize Parental Choice and Implement Supply Building Mechanisms

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

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

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

The child care certificate contains demographic information for the parent and the child, the parent work activity, the name and address of the provider, the funding eligibility category, and the amount of co-pay, if applicable. Once the parent makes a selection of a provider, the Lead Agency directly issues a certificate to the child care provider of choice.

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

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

Describe:

Lead Agency provides consumer education and explains parent's rights and responsibilities on choosing child care. If necessary, the parent is referred to CCR&R for additional assistance. Once the parent makes a selection of a provider, the Lead



Agency directly issues a certificate to the child care provider of choice.

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

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

A parent participating in the child care certificate program has the choice to use that certificate at any regulated, or authorized agency that has signed a contract and has agreed to the terms of the program (exception-non-TANF can only be used at eligible TDHS licensed/TDOE approved child care agencies). We consistently encourage child care providers to participate in the program.

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

Approximately seventy-seven percent of all eligible TDHS licensed agencies and twenty-one percent of TDOE approved agencies participate in the child care certificate program.

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

Common barriers identified by providers include subsidy rate not sufficient; limited capacity; amount of paperwork required; and payment practices.

The Lead Agency conducted a survey of providers in May 2021 to collect additional information about rates, barriers to participation, and information about any additional fees collected from parents. 356 providers participated in the survey. Respondents by agency type:

- Center (66.5%)
- Group Home (13.5%)
- Family Home (14.1%)
- School (5.9%)

Only 13.9% of providers completing the survey indicated they have experienced a barrier. Those who indicated they have experienced a barrier provided the following examples:

- Paperwork required
- Subsidy rate not sufficient
- Payment Practices
- Limited Capacity
- Other

Generally, examples of other areas where providers identified barriers are customer service, delays in payments, income limitations, not enough children on the program, communication, extra work for child care directors. The Lead Agency is and has been pursuing multiple strategies to address the barriers raised by providers, through revision of program policies and modernization of systems.

**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)).**

The Lead Agency requires licensed or approved child care agencies to permit parents/guardians immediate access to their children unless an Order of Protection or other legal document otherwise restricts or prohibits such access. The Lead Agency requires authorized child care professionals afford parents/guardians unlimited access to their children whenever their children are in care unless an Order of Protection or other legal document otherwise restricts or prohibits such 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.

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

Describe:

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

Describe:

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

Describe:

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

Describe:

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild

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

Describe:

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

Describe:

g. Other.

Describe:

#### 4.1.6 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.7.

Yes, in some jurisdictions but not statewide.

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

Yes, statewide. If yes, describe:

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

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

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

#### 4.1.6 Child care services available through grants or contracts.

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

No

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

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

To increase the supply of care

To increase the quality of care

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

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

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

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

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

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

Describe

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

a. In child care centers.

The Lead Agency reviews Child Care Certificate Program data to determine the needs for children in underserved areas. Monthly data on the number of agencies and capacity by county, regulatory agency, quality rating, and provider type is available to track progress and to monitor changes in the volume of available care.

The number of agencies in a given area along with census data about the age eligible children of working families was used to identify needs. Child Care Aware mapped supply & demand for child care in the state in 2018. Link to 2018 mapping:

<https://ccaoa.maps.arcgis.com/apps/webappviewer/index.html?id=536b03860f1f4da8815206b336f16eaa>

Provisions to continue this mapping annually through one of our partners has been added to the FY22 contracts. This effort will be combined with the creation of an on-demand report that will allow us to pull historical data on the number of agencies and capacity by county, regulatory agency, quality rating, and provider type for a given point

in time to analyze changing needs over time.

**b. In child care homes.**

The Lead Agency reviews Child Care Certificate Program data to determine the needs for children in underserved areas. Monthly data on the number of agencies and capacity by county, regulatory agency, quality rating, and provider type is available to track progress and to monitor changes in the volume of available care.

The number of agencies in a given area along with census data about the age eligible children of working families was used to identify needs. Child Care Aware mapped supply & demand for child care in the state in 2018. Link to 2018 mapping:

<https://ccaoa.maps.arcgis.com/apps/webappviewer/index.html?id=536b03860f1f4da8815206b336f16eaa>

Provisions to continue this mapping annually through one of our partners has been added to the FY22 contracts. This effort will be combined with the creation of an on-demand report that will allow us to pull historical data on the number of agencies and capacity by county, regulatory agency, quality rating, and provider type for a given point in time to analyze changing needs over time.

**c. Other.**

NA

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

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

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

Describe:

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

Describe:

The Lead Agency and its partners are providing statewide pre-licensing/orientation and new rules training for new and existing family child care providers who also receive on-site coaching and mentoring supports to improve child care quality through the Tennessee Early Childhood Training Alliance Family Child Care Network (TFCCN). Family child care providers have professional development opportunities statewide through the CCR&R and Tennessee Early Childhood Training Alliance (TECTA). The TFCCN under TECTA offers Family child care providers across the state additional opportunities to participate in family child care specifically designed services that include linages with the Tennessee Family Child Care Alliance, Regional and local family child care support groups in order to strengthen the commitment to high quality care, children, and families. The TECTA provides overall support for professional development, business practices, family engagement, child care advocacy, regional and state Family Child Care conference and the optional Technical Pathway for Family child care providers to earn a CDA®. The TFCCN provides the technical assistance and mentoring specific to family child care providers in attaining and maintaining high quality practices including NAFCC accreditation. annual Environment Rating Scales Assessments. The TECTA with the TFCCN collaborate with family child care providers and other state partners to develop quality enhancements and professional development plans with each family child care provider. The TECTA with the TFCCN under the guidance of the Lead Agency will target growth of family home providers in child care deserts by promoting entrepreneurship and small business ownership opportunities.

iii. Start-up funding.

Describe:

In 2020, the Lead Agency launched establishment grants to support applicants seeking to become licensed. In order to qualify for an establishment grant, an applicant must have completed certain steps such as attending pre-licensure orientation, obtaining a Federal Employer Identification Number, having necessary



business permits, completing initial inspection, a background check and business academies. Funds from establishment grants can be used for items that will be important to opening a quality program such as furniture, equipment and supplies.

[iv. Technical assistance support.](#)

[Describe:](#)

The Lead Agency through its licensing unit provides direct technical assistance. The Lead Agency also leverages its partnerships with Child Care Resource and Referral, the Tennessee Early Childhood Training Alliance, and the FCCN to deliver effective on-site technical assistance, mentoring, and coaching.

[v. Recruitment of providers.](#)

[Describe:](#)

The FCCN and Tennessee Early Childhood Training Alliance (TECTA) under the guidance of the Lead Agency will target growth of family home providers in childcare deserts by promoting entrepreneurship, small business ownership opportunities, and the benefits of licensure. TECTA-FCCN advisors/mentors participate in Pre-licensing and Orientations for potential family child care providers and assist them with the licensing requirement process. Advisors/mentors go on-site and provide technical assistance through peer-to-peer mentoring. In 2021, the Lead Agency created a new unit under the licensing team. The Pre-Licensure Unit was created to assist providers as they go through the process for state licensure. Duties include educating potential providers on licensing requirements, assisting in licensing rules interpretation, and answering provider questions to ensure they are following all rules and regulations and offering a safe, enriching environment for children and families. Members of the Pre-Licensure Unit will serve as liaisons to community stakeholders such as employers and local governments to strengthen understanding of the need for child care and to partner on developing solutions.

[vi. Tiered payment rates \(as in 4.3.3\).](#)

[Describe:](#)

Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned. Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality

program. Bonus payments are available for agencies that earn One (5%), Two(15%), or Three (20%) Stars through the QRIS. In 2019, the Lead Agency also implemented 15% subsidy rate bonuses for areas identified as child care deserts, distressed counties, and agencies offering care during non-traditional hours.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon the equal importance of health/safety practices and teacher/child interactions.

- [vii. Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

The Lead Agency is providing a portfolio of shared services at no cost to all child care agencies through a contract with the Community Foundation of Middle Tennessee that includes: business management tools, human resource tools, program administration tools, classroom resources, and group purchasing (national, state, and local levels). The Lead Agency has also created small business academies through a contract with Child Care Resource & Referral to support, strengthen, and improve small business practices among child care providers.

- [viii. Accreditation supports.](#)

[Describe:](#)

Currently, The Tennessee Early Childhood Training Alliance (TECTA) offers technical assistance and financial support for child care providers seeking accreditation by either the National Association of Family Child Care (NAFCC), National Early Childhood Program Accreditation (NECPA), or the National Association for the Education of Young Children (NAEYC). Accreditation collaboration with state affiliates and/or National organizations allows TECTA to provide reliable consistent support based upon best practices for Self-study for earning accreditation status or maintaining the accreditation standards of the accrediting agency.

ix. Child Care Health Consultation.

Describe:

The Tennessee Child Care Resource & Referral Network employs 15 Health, Safety and Well-Being Coaches, who are located throughout the state to promote the health and safety practices in early care and education, promote developmental monitoring and screening, resources and supports for children with disabilities, and information on social and emotional development of children in child care agencies, teachers and families.

x. Mental Health Consultation.

Describe:

The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators, including consultation and technical assistance.

xi. Other.

Describe:

Through participation in ACF's strengthening family child care quality peer learning groups, the Lead Agency explored strategies for increasing the supply of care during non-traditional hours. This has been placed on hold due to COVID. Although TECTA and the Lead Agency remain in contact with ACF's TA resources for some guidance in the ongoing development of outreach and supports for the TFCCN improvement of practice based upon National trends and data.

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

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

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

Describe:

ii. Family Child Care Networks.

Describe:

The Tennessee Early Childhood Training Alliance (TECTA) closely collaborate with the Child Care Resource and Referral Network (CCR&R) to ensure intensive, developmentally appropriate infant-toddler coaching is available to family providers statewide. Peer-to-peer mentoring through the Tennessee's Outstanding Providers Supported Through Available Resources (TOPSTAR) program relies on additional specialized coaching delivered by a team of 15 CCR&R Infant-Toddler Quality Coaches who are extensively trained in caring for infants and toddlers in group settings through the WestEd Program for Infant and Toddler Care (PITC).

Additionally, TECTA collaborates with TNVoices for Children in using the Pyramid Model for Promoting the social emotional development of young children. TFFCN Advisors and TECTA FCC Specialists work with TNVoices and Team Tennessee to provide TA and TTA or other group training. This assured for integrity of training and technical assistance for Mentors as well as protégés within the TFCCN peer-to-peer mentoring for appropriate positive behavior supports as well as successful relationships that provide positive social emotional development.

iii. Start-up funding.

Describe:

In 2020, the Lead Agency launched establishment grants to support applicants seeking to become licensed. In order to qualify for an establishment grant, an applicant must have completed certain steps such as attending pre-licensure orientation, obtaining a Federal Employer Identification Number, having necessary business permits, completing initial inspection, a background check and business academies. Funds from establishment grants can be used for items that will be important to opening a quality program such as furniture, equipment and supplies.

iv. Technical assistance support.

Describe:

The Lead Agency through its licensing unit provides direct technical assistance.

The Lead Agency also leverages its partnerships with Child Care Resource and Referral, the Tennessee Early Childhood Training Alliance, and the Tennessee Family Child Care Alliance to deliver effective on-site technical assistance, mentoring, and coaching. The Lead Agency contracts with the Child Care Resource and Referral Network (CCR&R) to provide intensive and developmentally appropriate infant-toddler coaching statewide through its specialized team of 15 Infant-Toddler Quality Coaches who are extensively trained in caring for infants and toddlers in a group setting through the WestEd Program for Infant and Toddler Care (PITC).

 [v. Recruitment of providers.](#)

[Describe:](#)

The TECTA TFCCN under the guidance of the Lead Agency targets growth of family home providers in childcare deserts by promoting entrepreneurship, small business ownership opportunities, and the benefits of licensure. TECTA-TFCCN advisors/mentors participate in Pre-licensing and Orientations for potential family child care providers and assist them with the licensing requirement process. Collaborations with the Small Business Academies operated by CCR&R allows Advisors as well as TECTA Family Child Care Specialists to provide appropriate pathways for promoting the successful operations of family child care or group homes. Advisors guide mentors go on-site and provide technical assistance through peer-to-peer mentoring with new providers. In 2021, the Lead Agency created a new unit under the licensing team. The Pre-Licensure Unit was created to assist providers as they go through the process for state licensure. Duties include educating potential providers on licensing requirements, assisting in licensing rules interpretation, and answering provider questions to ensure they are following all rules and regulations and offering a safe, enriching environment for children and families. Members of the Pre-Licensure Unit will serve as liaisons to community stakeholders such as employers and local governments to strengthen understanding of the need for child care and to partner on developing solutions.

 [vi. Tiered payment rates \(as in 4.3.3\).](#)

[Describe:](#)

Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality

program. Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned. Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions.

- [vii. Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

The Lead Agency is providing a portfolio of shared services at no cost to all child care agencies through a contract with the Community Foundation of Middle Tennessee that includes: business management tools, human resource tools, program administration tools, classroom resources, and group purchasing (national, state, and local levels). The Lead Agency has also created small business academies through a contract with Child Care Resource & Referral to support, strengthen, and improve small business practices among child care providers.

- [viii. Accreditation supports.](#)

[Describe:](#)

The Tennessee Early Childhood Training Alliance (TECTA) offers technical assistance and financial support for child care providers seeking accreditation by either the National Association of Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).

- [ix. Child Care Health Consultation.](#)

[Describe:](#)

The Tennessee Child Care Resource & Referral Network employs 15 Health, Safety and Well-Being Coaches, who are located throughout the state to promote the health and safety practices in early care and education, promote developmental monitoring and screening, resources and supports for children with disabilities, and information on social and emotional development of children in child care agencies,

teachers and families.

x. Mental Health Consultation.

Describe:

The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators, including consultation and technical assistance.

xi. Other.

Describe:

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

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

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

Describe:

ii. Family Child Care Networks.

Describe:

The TECTA-FCCN network collaborates with the Child Care Resource & Referral Network (CCR&R) who employs 15 Health, Safety, and Well-Being Coaches to provide on-site technical assistance and coaching in early care and education environments and specialized resources and supports for child care agencies and families caring for children with developmental delays/special needs and or disabilities.

iii. Start-up funding.

**Describe:**

In 2020, the Lead Agency launched establishment grants to support applicants seeking to become licensed. In order to qualify for an establishment grant, an applicant must have completed certain steps such as attending pre-licensure orientation, obtaining a Federal Employer Identification Number, having necessary business permits, completing initial inspection, a background check and business academies. Funds from establishment grants can be used for items that will be important to opening a quality program such as furniture, equipment and supplies.

**iv. Technical assistance support.**

**Describe:**

The Lead Agency through its licensing unit provides direct technical assistance. The Lead Agency also leverages its partnerships with Child Care Resource and Referral, the Tennessee Early Childhood Training Alliance FCCN to deliver effective on-site technical assistance, mentoring, and coaching. The Child Care Resource & Referral Network (CCR&R) employs 15 Health, Safety, and Well-Being Coaches on-site technical assistance and coaching in early care and education environments and specialized resources and supports for child care agencies and families caring for children with developmental delays/special needs and or disabilities.

**v. Recruitment of providers.**

**Describe:**

TECTA-FCCN under the guidance of the Lead Agency targets growth of family home providers in childcare deserts by promoting entrepreneurship, small business ownership opportunities, and the benefits of licensure. TECTA-FCCN advisors/mentors participate in Pre-licensing and Orientations for potential family child care providers and assist them with the licensing requirement process. Advisors/mentors go on-site and provide technical assistance through peer-to-peer mentoring. In 2021, the Lead Agency created a new unit under the licensing team. The Pre-Licensure Unit was created to assist providers as they go through the process for state licensure. Duties include educating potential providers on licensing requirements, assisting in licensing rules interpretation, and answering provider questions to ensure they are following all rules and regulations and



offering a safe, enriching environment for children and families. Members of the Pre-Licensure Unit will serve as liaisons to community stakeholders such as employers and local governments to strengthen understanding of the need for child care and to partner on developing solutions.

[vi. Tiered payment rates \(as in 4.3.3\).](#)

[Describe:](#)

Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality program. Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned. Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS.

[vii. Support for improving business practices, such as management training, paid sick leave, and shared services.](#)

[Describe:](#)

The Lead Agency is providing a portfolio of shared services at no cost to all child care agencies through a contract with the Community Foundation of Middle Tennessee that includes: business management tools, human resource tools, program administration tools, classroom resources, and group purchasing (national, state, and local levels). The Lead Agency has also created small business academies through a contract with Child Care Resource & Referral to support, strengthen, and improve small business practices among child care providers.

[viii. Accreditation supports.](#)

[Describe:](#)

The Tennessee Early Childhood Training Alliance (TECTA) offers technical assistance and financial support for child care providers seeking accreditation by either the National Association of Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).

[ix. Child Care Health Consultation.](#)

**Describe:**

The Tennessee Child Care Resource & Referral Network employs 15 Health, Safety and Well-Being Coaches, who are located throughout the state to promote the health and safety practices in early care and education, promote developmental monitoring and screening, resources and supports for children with disabilities, and information on social and emotional development of children in child care agencies, teachers and families.

**x. Mental Health Consultation.**

**Describe:**

The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators, including consultation and technical assistance.

**xi. Other.**

**Describe:**

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

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

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

**Describe:**

**ii. Family Child Care Networks.**

**Describe:**

The Lead Agency and its partners are providing statewide pre-licensing/orientation and new rules training for new and existing family child care providers who also

receive on-site coaching and mentoring supports to improve child care quality through the TECTA-FCCN. Family child care providers have professional development opportunities statewide through the CCR&R and TECTA. Family child care providers across the state have additional opportunities to participate in the TECTA-FCCN (statewide network of family and group home child care providers committed to high quality care, children, and families). The TECTA-FCCN provide support for professional development, business practices, family engagement, child care advocacy, and to support educator's understanding of the new QRIS redesign/quality rating indicators. The TECTA-FCCN also collaborate with family child care providers and other partners to develop quality enhancement and professional development plans with each family child care provider. TECTA-FCCN, under the guidance of the Lead Agency, targets accessibility and availability of quality child care services locally by promoting nontraditional hours of operations.

**iii. Start-up funding.**

**Describe:**

In 2020, the Lead Agency launched establishment grants to support applicants seeking to become licensed. In order to qualify for an establishment grant, an applicant must have completed certain steps such as attending pre-licensure orientation, obtaining a Federal Employer Identification Number, having necessary business permits, completing initial inspection, a background check and business academies. Funds from establishment grants can be used for items that will be important to opening a quality program such as furniture, equipment and supplies.

**iv. Technical assistance support.**

**Describe:**

The Lead Agency through its licensing unit provides direct technical assistance. The Lead Agency also leverages its partnerships with Child Care Resource and Referral, the Tennessee Early Childhood Training Alliance, and the Tennessee Family Child Care Alliance to deliver effective on-site technical assistance, mentoring, and coaching.

v. Recruitment of providers.

Describe:

The lead agency is increasing the number of statewide pre-licensing/orientation trainings to recruit providers who will provide non-traditional hours of care. In 2021, the Lead Agency created a new unit under the licensing team. The Pre-Licensure Unit was created to assist providers as they go through the process for state licensure. Duties include educating potential providers on licensing requirements, assisting in licensing rules interpretation, and answering provider questions to ensure they are following all rules and regulations and offering a safe, enriching environment for children and families. Members of the Pre-Licensure Unit will serve as liaisons to community stakeholders such as employers and local governments to strengthen understanding of the need for child care and to partner on developing solutions.

vi. Tiered payment rates (as in 4.3.3).

Describe:

Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality program. Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned. Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS. In 2019, the Lead Agency also implemented 15% subsidy rate bonuses agencies offering care during non-traditional hours.

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

Describe:

A wide array of resources including business management tools, human resource tools, program administration tools, classroom resources, and templates, i.e. emergency preparedness plans, were made available at no cost to child care agencies licensed by the Lead Agency through an online centralized knowledge resource that aligns with State requirements. These tools equip and better enable child care administrators and educators to focus more on the child care side of their agency and less on developing business practices from scratch.

[viii. Accreditation supports.](#)

[Describe:](#)

The Tennessee Early Childhood Training Alliance (TECTA) offers technical assistance and financial support for child care providers seeking accreditation by either the National Association of Family Child Care (NAFCC) or the National Association for the Education of Young Children (NAEYC).

[ix. Child Care Health Consultation.](#)

[Describe:](#)

The Tennessee Child Care Resource & Referral Network employs 15 Health, Safety and Well-Being Coaches, who are located throughout the state to promote the health and safety practices in early care and education, promote developmental monitoring and screening, resources and supports for children with disabilities, and information on social and emotional development of children in child care agencies, teachers and families.

[x. Mental Health Consultation.](#)

[Describe:](#)

The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators, including consultation and technical assistance.

[xi. Other.](#)

[Describe:](#)

Through participation in ACF's strengthening family child care quality peer learning groups, the Lead Agency explored strategies for increasing the supply of care during non-traditional hours. This has been placed on hold due to COVID. Although TECTA and the Lead Agency remain in contact with ACF's TA resources for some guidance in the ongoing development of outreach and supports for the TFCCN improvement of practice based upon National trends and data.

[4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services \(98.16 \(x\)\). These strategies](#)

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

e. Other. Check and describe all that apply.

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

Describe:

Lead Agency is exploring the possibility of utilizing ARP funds for these purposes:

Access to high-quality and affordable child care is critical to economic recovery and growth. Below is a list of priorities for how American Rescue Plan Act (ARPA) and recurring Child Care Development Fund (CCDF) dollars can be deployed to maximize supports for families and providers. Through the expansion of existing programs and establishment of new programs, TDHS will support families and aid child care providers in pandemic recovery, while investing in long-term strategic goals to grow child care capacity and quality across the state. Initiatives are organized into 3 categories, consistent with ARPA priorities:

**Supporting families through access to child care payment assistance, with a focus on equity**

- Establishing a new reemployment category of child care assistance- Referral-based category of child care payment assistance for parents currently unemployed but engaged in job search activities, established in partnership with Department of Labor and Workforce Development.
- Continuing pandemic/essential employee child care assistance through August 2021.
- Supporting families of children with special needs (establishing a 15% differential above standard reimbursement rates for children identified with disabilities and special needs).
- Creating support for families experiencing homelessness (establishing a referral process and prioritization category for homeless families to receive childcare assistance in partnership with TDHS 2-Gen agencies, CSBG agencies, and the Department of Education McKinney-Vento programming).
- Expanding age criteria for the Smart Steps program from kindergarten to 8 years of age.

**Strengthen child care providers through financial stabilization**

- Issuing stabilization funds through subgrants to qualified child care providers to

stabilize their operations according to the ARPA designated allowable uses. The activities may include up to 10% to administer funds, provide technical assistance and support for applying/accessing subgrants, and support activities to increase supply of child care. Details of the child care stabilization grant program are still being finalized, including the final application design to be posted on the website. Information regarding impacts and results will be available after the funds are distributed.

- Forming an application process supported by technical assistance that will include outreach activities to explain the process, support payment distribution and backend accountability, including making application materials available in multiple languages.

### **Grow capacity of child care providers statewide through strategic partnerships and technical assistance**

- Temporary subsidy rate increase (10/1/21-10/1/23) to stabilize the industry and address equity in assessing quality child care.
- Addressing the digital divide by deploying the "Tech Goes Home" model, including provision of technology hardware, coaching and TA on the use of equipment and how it strengthens business operations.
- Expanding WAGE\$ eligibility for the education-based salary program by increasing the eligibility cap from \$15/hour to \$20/hour and increasing supplement amount by 50 percent.
- Offering an establishment grant program to provide financial support for furniture, equipment, supply, and curriculum costs associated with opening a new child care agency (aligned with the new TDHS Pre-Licensure Support Unit). TDHS is also in discussion with the Tennessee Department of Economic Development to explore how Community Development Block Grant funds might be used to support construction or renovation of child care spaces.
- Utilizing funds to modernize the Lead Agency data systems (new eLicensing platform) to better meet the demand for child care.
- Supporting the Tennessee Child Care Task Force (established during the 2021 legislative session) in recommending a strategic action plan to increase the availability of high-quality, affordable, and accessible child care as families, child care providers, employers, and communities across the state work to recover from the impacts of COVID-19.

#### ii. Family Child Care Networks.

Describe:

#### iii. Start-up funding.

Describe:

iv. Technical assistance support.

Describe:

v. Recruitment of providers.

Describe:

vi. Tiered payment rates (as in 4.3.3).

Describe:

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

Describe:

viii. Accreditation supports.

Describe:

ix. Child Care Health Consultation.

Describe:

x. Mental Health Consultation.

Describe:

xi. Other.

Describe:

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

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



Concentrations of poverty and unemployment are identified based upon U.S. Census Bureau data on county poverty rates to determine the percentage of persons below the poverty level and Tennessee Department of Labor & Workforce Development data on unemployment by county. The Lead Agency also utilizes a GIS application to map distribution of child care agencies statewide by Star Quality rating. Example of data sources:

<https://www.indexmundi.com/facts/united-states/quick-facts/tennessee/percent-of-people-of-all-ages-in-poverty#map>

<https://www.tn.gov/workforce/tennessee-economic-data-/labor-force-statistics/unemployment-rates.html>

<https://ccaoa.maps.arcgis.com/apps/webappviewer/index.html?id=536b03860f1f4da8815206b336f16eaa>

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

The Lead Agency in collaboration with CCR&R has developed an outreach plan in areas of significant poverty and unemployment to encourage more opportunities and training for potential high quality child care providers. Small Business Support Specialists engage providers in the pre-licensure process and encourage and educate new child care agencies to open operations in these specific areas by focusing on high quality business practices and available grant opportunities. Family Engagement Specialists work with families to connect them with child care agencies in their area through parent trainings and community events. All quality coaches make it a priority to reach out to all agencies at the zero or one star level of the QRIS and work with them on Enhanced Quality Improvement Plans (EQIP). These EQIPs are designed to help agencies focus on specific quality improvement goals, identify action steps, and measure progress through intensive practice-based coaching visits over an extended period of time. In 2021, the Lead Agency created a new unit under the licensing team. The Pre-Licensure Unit was created to assist providers as they go through the process for state licensure. Duties include educating potential providers on licensing requirements, assisting in licensing rules interpretation, and answering provider questions to ensure they are following all rules and regulations and offering a safe, enriching environment for children and families. Members of the Pre-Licensure Unit will serve as liaisons to community stakeholders such as employers and local governments to strengthen understanding of the need for child

care and to partner on developing solutions.

## 4.2 Assess Market Rates and Analyze the Cost of Child Care

### 4.2 Assess Market Rates and Analyze the Cost of Child Care

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

Regardless of whether Lead Agencies conduct a MRS or an alternative methodology, they are required to analyze the cost of providing child services, known as the narrow cost analysis, that meet basic health/safety/quality and staffing requirements (base level care) (98.45(b)(3), (f)(1)(ii)(A), and (f)(2)(ii)), and higher-quality care at each level of quality, as defined by the Lead Agency (98.45(b)(4), (f)(1)(ii)(B), and (f)(2)(iii)). The analysis must identify the gaps between the cost of care and subsidy levels adopted by the state and then be considered as part of the rate setting process.

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

A MRS or an ACF pre-approved alternative methodology must be developed and conducted no

earlier than 2 years before the date of submission of the Plan (658E(c)(4)(B)(i) (98.45 (c)). Due to the COVID-19 pandemic, Lead Agencies may request a waiver for up to one additional year (until July 1, 2022) to complete the required MRS or an ACF pre-approved alternative methodology. Lead Agencies may also request the required Narrow Cost Analysis be waived for one year (until July 1, 2022). These waiver requests must include a justification linked to the COVID-19 pandemic.

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

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

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

a. MRS.

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

b. ACF pre-approved alternative methodology.

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

No, a waiver is being requested in Appendix A.

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

i. MRS.

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

The Lead Agency collected information from stakeholders and was scheduled to conduct the MRS/Cost of Care analysis in March of 2020 but postponed that effort due to the extraordinary circumstances of the pandemic. During that time, most providers were experiencing significantly lower enrollment and ongoing temporary or extended closures under the circumstances of the pandemic that threatened the sustainability of their operations. The Lead Agency was mindful of not adding any additional burden on providers at this time and recognized that information collected would be skewed due to the extraordinary circumstances. Therefore, the

cost of care survey was revised with additional feedback from stakeholders and questions were added to capture additional information about how operations and costs have changed under the circumstances of the pandemic. The data collection for the MRS/Cost of Care analysis began in March 2021 and will be completed by mid-July. The final results of MRS/Cost of Care analysis are expected to be finalized by early fall.

ii. ACF pre-approved alternative methodology.

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

b. If a waiver is requested, Lead Agencies will need to respond to questions 4.2.2- 4.5.2 based on data collected for the FY 2019-2021 CCDF Plan or any data collected since then. Identify the date of the Lead Agencies' most recent and complete Market Rate Survey or ACF pre-approved alternative methodology that will provide data to inform responses to questions 4.2.2 - 4.5.2. 08/24/2018

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

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

A survey designed to collect feedback regarding the annual market rate survey was distributed to the Tennessee Young Child Wellness Council, licensed child care agencies, and partners. The survey was distributed via email.

b) Local child care program administrators:

A survey designed to collect feedback regarding the annual market rate survey was

distributed to the Tennessee Young Child Wellness Council, licensed child care agencies, and partners. The survey was distributed via email.

**c) Local child care resource and referral agencies:**

A survey designed to collect feedback regarding the annual market rate survey was distributed to the Tennessee Young Child Wellness Council, licensed child care agencies, and partners. The survey was distributed via email.

**d) Organizations representing caregivers, teachers, and directors:**

A survey designed to collect feedback regarding the annual market rate survey was distributed to the Tennessee Young Child Wellness Council, licensed child care agencies, and partners. The survey was distributed via email.

**e) Other. Describe:**

NA

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

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

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

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

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

The Child Care Market Rate Survey utilizes the Department of Human Services'

exhaustive list of reported provider rates across care type and child age, as well as the proportion of providers' enrollment that is subsidized.

**ii. Provide complete and current data:**

Lead Agency Licensing Consultants updates the rates for all licensed providers within a designated time-frame of less than three months to ensure the data was current.

**iii. Use rigorous data collection procedures:**

In order to minimize the effect of subsidization on market rate calculations, providers with more than half of their enrollments receiving subsidies for childcare are excluded. Additionally, a lower bar is set on weekly rates in order to exclude reported part-time rates from analysis. Finally, if a provider does not report a weekly rate, it is calculated using, for example, the daily rate provided. After these adjustments are made to the data, the average market rate and ranked percentiles are calculated for two tiers of the market, as well as for the state as a whole. The Top Tier Market is comprised of Tennessee counties that are one of the top 20 highest in population or have one of the top 20 highest per capital personal income averages. The Lower Tier Market includes all those counties not in the Top Tier Market. Separating the two markets based on population and personal income captures the different conditions faced in each market, and exclusion of heavily-subsidized providers minimizes the Lead Agency's influence on percentile and average calculations.

**iv. Reflect geographic variations:**

The response rate is identified within each of the market rate survey results tables. It identifies the number of agencies reporting for each age group for licensed child care centers, group child care homes, and family child care homes. The results include tables that outline the average fee for age bracket by geographic regions that include urban and rural counties, and all counties combined.

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

In addition to the aspects described above, the survey results include data for the ten most populous metropolitan statistical areas and the median fee by care type by county for child care centers, group homes, and family homes.

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

No

Yes.

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

NA

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

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

The Market Rate data are gathered from an Annual Reporting Survey that is required of all licensed child care agencies in the state of Tennessee. Child care providers (centers, group homes, family homes) statewide are required to update their rates in the licensing child care data base annually. In years when we are conducting a MRS that qualifies for the the state plan submission, licensing field staff update the rates during a three month window. The provider rates used in the MRS reflects the variations in the price of care statewide. Rates are analyzed by county to establish a top tier group that includes counties that were either one of the top-20 highest population counties or one of the top-20 highest average per capita personal income counties. The remaining counties are in the second tier group. Rates for a given county are established according to their respective tier level.

b) Type of provider. Describe:

Rate data for all active child care providers across the state are collected and reported for three provider categories: Day Care Centers, Group Homes, and Family Homes.

c) Age of child. Describe:

Within each provider category, rates are further categorized by age of child (infant through school-age).

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

Percentiles are reported for two groups of counties, as well as the state as a whole. The method used to identify the counties in the first group (Tier I Market) includes those Tennessee counties that were either one of the top-20 highest 2013 population counties or one of the top-20 highest 2011-2013 average per capita personal income counties. This method is preferable to one that relies on a ranking of the average daycare rates charged by day care centers. Use of population and personal income rankings allows selection based on measures that are likely correlated with the conditions in each market for child care services, while at the same time it separates the selection criteria from the Lead Agency's influence on the market rates.

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

No, a waiver is being requested in Appendix A. If no, describe the status of the Lead Agency's upcoming narrow cost analysis.

Yes, the narrow cost analysis information is included in the report as described in 4.2.6. If yes, describe how the State/Territory analyzed the cost of child care through a narrow cost analysis for the FY 2022 - 2024 CCDF Plan, including:

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

NA

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

NA

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

NA



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

NA

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

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

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

- a. Date the report containing results was made widely available - no later than 30 days after the completion of the report. 08/24/2018
- b. Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

The most recent qualifying market rate survey was compiled July 2018, reviewed by the

lead agency, and approved on 08/24/2018. The results were posted on the website on 08/24/2018. The results of the 2017-2018 market rate survey were posted on the Lead Agency website. Information about the availability of the market rate survey results was included in the Child Care News Brief/Newsletter sent to child care providers and partners on August 28, 2018 Link to market rate survey results:

<https://www.tn.gov/content/dam/tn/human-services/documents/Market%20Rate%20Survey%202017-2018.pdf>

c. Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

Child care providers, advisory groups, and partners gave feedback and contributed to the design of the annual market rate survey during the spring of 2018, . In response to the comments received, the Lead Agency calculated the Median Fee by Care Type and Age by County for each category of care and included this additional county level data in the overall results of the 2017-2018 survey.

### 4.3 Establish Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or ACF pre-approved alternative methodology, as identified in 4.2.1, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF assistance. Lead Agencies must also consider the costs of base and higher quality care at each level as part of its rate setting. The Lead Agency must re-evaluate its payment rates at least every 3 years.

**4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.**

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

Lead Agencies are required to provide a summary of data and facts in their Plan to demonstrate how its payment rates ensure equal access. The preamble to the final rule (81 FR, p. 67512),

indicates that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure that eligible children have access to three out of four child care slots.

The 75th percentile benchmark applies to the base rates. Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes). Further, base rates must be sufficient to ensure that minimum health and safety and staffing requirements are covered.

Percentiles are not required if the Lead Agency conducted an ACF pre-approved alternative methodology, but must be reported if the Lead Agency conducted a MRS. For states that conduct an ACF pre-approved alternative methodology, report the base payment rates based on a full-time weekly rate.

The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please use the most populous geographic region (defined as the area serving highest number of CCDF children) to report base payment rates below.

a. Provide the base payment rates and percentiles based on either the statewide rates or the most populous area of the state (area serving highest number of children accessing CCDF). To facilitate compiling state by state payment rates, provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

i. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Center care:

Base payment rate: 178

Full-time weekly base payment rate: 178

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58th-59th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

ii. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Center care:

Base payment rate:155

Full-time weekly base payment rate: 155

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 48th-49th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

iii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Center care:

Base payment rate:121

Full-time weekly base payment rate: 121

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 35th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

iv. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Center care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:90

Full-time weekly base payment rate: 90

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 62nd-63rd

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

v. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Family Child Care:

Base payment rate:135 Family 155 Group

Full-time weekly base payment rate: 135 Family 155 Group

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? Family 62nd-63rd Group 78th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

vi. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Family Child Care:

Base payment rate:128 Family 135 Group

Full-time weekly base payment rate: 128 Family 135 Group

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? Family 65th-66th Group 60th-66th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

vii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Family Child Care:

Base payment rate:109 Family 110 Group

Full-time weekly base payment rate: 109 Family 110 Group

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? Family 40th Group 32nd-36th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

viii. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Family Child Care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:90 Family 90 Group

Full-time weekly base payment rate: 90 Family 90 Group

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? Family 51st-59th Group 37th-39th

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? NA

b. If the Lead Agency does not publish weekly rates then how were these rates calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)?

NA

c. Describe how the Lead Agency defines and calculates part-time and full-time care.

Full-time is defined and calculated as 20 or more hours per week and part-time is anything less than 20 hours per week.

d. Provide the date these current payment rates became effective (i.e., date of last update based on most recent MRS as reported in 4.2.1). 10/01/2020

e. If applicable, identify the most populous area of the state (area serving highest number of children accessing CCDF) used to complete the responses above.

The top-tier counties identified on the most recent market rate survey include: Anderson, Blount, Bradley, Cheatham, Davidson, Dyer, Fayette, Greene, Hamilton, Knox, Loudon, Madison, Maury, Montgomery, Moore, Putnam, Roane, Robertson, Rutherford, Sevier, Shelby, Stewart, Sullivan, Sumner, Washington, Williamson, and Wilson The Child Care Certificate Program Provider Reimbursement Rate Schedule includes the rates for both top tier and lower tier counties. Top tier counties are those with the 20 highest average populations and highest per capita incomes as determined by the market rate study. The yearly effective date on the reimbursement rate schedule is applicable to both the general reimbursement rates and any changes in county tier level that might impact the amount agencies within that county are paid.

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

<https://www.tn.gov/content/dam/tn/human-services/documents/Reimbursement%20Rate%20Chart%20Effective%20October%201%202020.pdf>

g. If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

NA

**4.3.2 Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.**

a. Geographic area.

Describe:

Payment rates are established for Top Tier and Lower Tier counties. The Top Tier Market is comprised of Tennessee counties that are one of the top 20 highest in population, or have one of the top 20 highest per capita personal income averages. The Lower Tier Market includes all those counties not in the Top Tier Market. The Lead Agency implemented 15% subsidy rate bonuses for child care deserts and distressed counties.

b. Type of provider.

Describe:

Payment rates are established for the following four agency types: Child Care Centers, Child Care Group Homes, Child Care Family Homes, and Authorized Professionals

c. Age of child.

Describe:

Payment rates are established for the following are levels: Infants (6 wks-12 mos), Toddlers (12 mos - 24 mos), PreSchool (24 mos - 5 yrs), School-Age In, School-Age Out.

d. Quality level.

Describe:

Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS.

e. Other.

Describe:

The Lead Agency implemented 15% subsidy rate bonuses for agencies offering care during non-traditional hours.

**4.3.3 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children). Lead Agencies may pay providers more than their private pay rates as an incentive or to cover costs for higher quality care (81 FR, p. 67514).**

Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

No.

Yes. If yes, identify below any tiered or differential rates, and at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply.

a. This option should not be selected if the answer above is "Yes" -- Tiered or differential rates are not implemented.

Describe:

b. Differential rate for non-traditional hours.

Describe:

15% subsidy bonus rates were implemented in 2019. The Lead Agency has implemented differential rates as an incentive to higher quality (awarding a higher rate for each successive star level) and to support/expand care during non-traditional hours, in areas identified as child care deserts and distressed counties. Differential rates are determined based upon the base rates established from the MRS results.

c. Differential rate for children with special needs, as defined by the state/territory.



Describe:

- d. Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- e. Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- f. Differential rate for higher quality, as defined by the state/territory.

Describe:

Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality program. Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned.

- g. Other differential rates or tiered rates.

Describe:

15% bonus rates for child care deserts and distressed counties.

#### 4.3.4 Establishment of adequate payment rates.

a. Describe how base payment rates are adequate and enable providers to meet health, safety, quality, and staffing requirements under CCDF, and how they were established based on the most recent MRS or ACF pre-approved alternative methodology and the Narrow Cost Analysis, as reported in 4.2.1 and 4.2.5.. In determining compliance with the Act for the equal access provisions in the FY2019-2021 CCDF Plan, the OCC reviewed all the states with payment rates below the 75th percentile benchmark. Of those states, the half with the lowest payment rates were considered non-compliant and placed on a corrective action plan (CAP). These states all had rates below the 25th percentile for either some or all categories of care. The 25th percentile is not to be viewed as a

benchmark or a long-term solution to gauge equal access. It is also not to be viewed as sufficient for compliance in future plan cycles. OCC expects to continue to take action against states with the lowest rates in future plan cycles in an effort to keep payment rates moving upward toward ensuring equal access. Note: Per the preamble (81 FR p. 67512), in instances where an MRS or ACF pre-approved alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

When the last qualifying Market Rate Survey was completed, seventy percent of child enrollments were in agencies with a 1, 2, or 3 quality star rating. These agencies were eligible for bonus payments beyond the base rate per DHS policy. Although the subsidy rates may be adequate for a basic level of care, the Lead Agency moved forward with plans to increase subsidy rates to better support basic care and quality enhancements for providers. The 2017-2018 MRS demonstrated that current subsidy rates have not kept up with market rates. An overall subsidy rate increase of 35% for infant/toddlers and 20% for preschool and school-age was implemented April 1, 2019. Additional increases were implemented July 1, 2019 to provide a 15% incentive to areas identified as child care deserts or economically distressed and a 15% incentive to child care programs that offer non-traditional hours of care. Targeted rate increases occurred July 1, 2019 and October 1, 2020 for care levels that fell below the 25th percentile of the most recent Market Rate Survey to increase above that threshold. In addition, we have determined a methodology for a cost of care analysis. The Cost of Care analysis was added to the contract (effective 10-1-19) scope for completing the Market Rate Survey in the summer of 2020, but the initiative was delayed due to the circumstances of the pandemic. The MRS/Cost of Care study was launched in March 2021. Data collection is scheduled to be completed by mid-July.

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.

The Child Care Certificate Program Provider Reimbursement Rate Schedule Provider reimbursement rates are set based upon top tier and lower tier counties. Top tier counties are those with the 20 highest average populations and highest per capita incomes as determined by the market rate study. The yearly effective date on the reimbursement rate schedule is applicable to both the general reimbursement rates and

any changes in county tier level that might impact the amount agencies within that county are paid. Quality bonus payments established through the tiered Quality Rating and Improvement System (QRIS) support standards that exceed minimum licensing requirements and promote demonstration by providers of higher-quality care. Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS as a way to support the cost of providing higher quality care.

**4.3.5 Describe how the Lead Agency took the cost of higher quality, as determined in 4.2.5, into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For states without a QRIS, the states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, or state-defined quality measures).**

Provider reimbursement rates are set based upon top tier and lower tier counties. Top tier counties are those with the 20 highest average populations and highest per capita incomes as determined by the market rate study. The yearly effective date on the reimbursement rate schedule is applicable to both the general reimbursement rates and any changes in county tier level that might impact the amount agencies within that county are paid. Quality bonus payments established through the tiered Quality Rating and Improvement System (QRIS) support standards that exceed minimum licensing requirements and promote demonstration by providers of higher-quality care. Bonus payments are available for agencies that earn One (5%), Two (15%), or Three (20%) Stars through the QRIS as a way to support the cost of providing higher quality care.

**4.3.6 Identify and describe any additional facts that the Lead Agency considered in determining its payment rates ensure equal access. If applicable, provide a description of how any additional health and safety costs, because of the COVID-19 pandemic are included in rate setting.**

The data collection for MRS/Cost of Care analysis was launched in March 2021. In response to the COVID-19 pandemic, we revised the cost survey to include questions about how

operations and costs have changed during the pandemic. The data collected will inform our understanding of the health and safety costs associated with the pandemic.

## 4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

### 4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)). Responses may also identify any additional health and safety fees providers are charging as a result of COVID-19.

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5);

98.45(l)(6)).

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

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

i. Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

ii. Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

As best practice, we try to issue payment within 10 business days.

b. To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

i. Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

ii. Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

iii. Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

iv. Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

Effective October 1, 2019, Lead Agency program staff were trained on revised policy to delink provider payment from occasional absences by paying based upon enrollment rather than attendance. Absences would not impact payment for a given child unless the child was absent for more than 20 days in a row. After an absence of 20 consecutive days, the Lead Agency would reach out to the family to confirm that the child was not returning to care before stopping the payments to the provider.

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).

The Lead Agency issues payments on a part-time or full-time basis rather than paying for specific hours of services or smaller increments of time. Accordingly, 1 through 19 hours of care is paid at the part-time rate and 20 or more hours of care is paid at the full-time rate.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

The Lead Agency collects information on registration and application fees through the annual report process for all licensed providers. Lead Agency program staff were trained on revised policy to allow for payment of reasonable mandatory registrations fees that the provider charges to private-paying parents by paying for registrations fees of up to \$100 two times per year and also paying for an annual registration fee of up to \$100 each year (if the provider charges such a fee).

d. The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees

charged to providers, including fees related to COVID 19, and the dispute-resolution process. Describe:

The Lead Agency maintains a contract with each provider that participates in the Child Care Certificate Program. The contract includes provisions regarding Payment Terms and Conditions (payment methodology, payment rates, payment and attendance, payment reductions, deductions, methods of collection of overpayments).

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:

The Lead Agency program staff were trained on revised policy to provide same day provider notification of any changes to the families eligibility status that could impact payments.

f. The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

The contract provides that the Lead Agency is the final decision maker of any payment disputes and can deny payments. The Lead Agency has a payment dispute resolution process that allows providers to request an administrative review related to adverse administrative actions such as disallowed costs, refused payments, or payment reductions. These provisions are outlined in Administrative Review process (Policy 11.36). For providers regarding disallowed costs, refused payments or payment reductions. They have 15 days from the decision letter to make the request. A desk review is completed. Appeals will acknowledge receipt of the request within 5 business days. The provider has 20 days to provide supporting documentation.

g. Other. Describe:

The Lead Agency is currently developing an electronic attendance and tracking system, including technology design and equipment purchasing that would allow providers and parents to electronically track and submit child attendance information. Once implemented system would be to allow more accurate, timely, and efficient reporting of child attendance and to support timely payments to providers. The system will also allow the Lead Agency to move away from predominantly paper processes for tracking attendance.

#### 4.4.2 Do payment practices vary across regions, counties, and/or geographic areas?

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

#### 4.4.3 Describe how Lead Agencies' payment practices described in subsection 4.4 support equal access to a full range of providers.

Our payment practices ensure that reimbursement is timely and dependable to reduce any barriers for the providers to participate in the child care certificate program.

#### 4.5 Establish Affordable Co-Payments

Family co-payments are addressed in Section 3 related to minimum 12-month eligibility and the graduated phase-out provision and also in this subsection, because they are an important element for determining equal access. If a Lead Agency allows providers to charge amounts more than the required family co-payments, the Lead Agency must provide a rationale for this practice, including how charging such additional amounts will not negatively impact a family's ability to receive care they might otherwise receive, taking into consideration a family's co-payment and the provider's payment rate.

4.5.1 How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF services (98.16 (k))? Check all that apply

a. Limit the maximum co-payment per family.

Describe: .



- b. Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

The current co-pay fees are calculated so that a family receiving subsidized childcare pays between 1-8% of their income toward that expense (not applicable if more than one child is receiving assistance).

- c. Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.2.5.

The Lead Agency has implemented Procedural Document 11.06-21.03 Over Income at Redetermination -Graduated Phase Out Procedures to apply to families who exceed the 60th percentile of State Median Income, yet remain under the 85th percentile of State Median Income at twelve month redetermination of eligibility. Should the parent exceed the 60th percentile for applicable payment assistance categories, they will be afforded a Graduated Phase-Out twelve month period. The co-pay amount is set at the highest level at the 60th percentile range for a twelve month period to allow the family to transition to full pay in order to avoid the financial cliff effect. The parent co-pays are based on seven percent of family income for each percentile range. Therefore, the family would be responsible for the co-pay at the maximum range for twelve months while they are under the graduated phase out period.

- d. Other.

Describe:

**4.5.2. 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.

This policy allows parents the most flexibility in choosing the care that will best meet their needs.

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.

The Lead Agency conducted a survey of providers in May 2021 to collect information about rates, barriers to participation, and information about any additional fees collected from parents. 356 providers participated in the survey. A large majority of respondents (84.9%) indicated they currently participate in the state's child care subsidy program. Almost half of these providers (48.5%) charge parents more than the program's required co-payments when their rates exceed the subsidy payment amount. The amount of the additional charges for the majority of respondents was less than \$50 and the most common frequency was weekly.

Providers were also asked about fees that parents are required to pay in addition to tuition. Almost three out of four respondents (71.1%) reported that parents were responsible for additional fees beyond tuition. The most common fees were associated with punitive actions - for late pick-up (83.4%), late payment (77.9%), and for writing a bad check (68.8%). Approximately two out of three providers who charge additional fees (64.0%) charge a registration fee. (Starting October 1, 2019, the Lead Agency began covering registration fees as part of the child care payment assistance program.) Other fees included enrollment and application fees, supplies, field trips and other activities.

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.

Based upon the analysis during the previous plan cycle, the Lead Agency increased to the subsidized child care payment rates to reduce the charges to families served.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for all child care providers in a state or territory and then moves to focus specifically on CCDF providers who may be licensed, or those exempt from licensing. The next section addresses child-staff ratios, group size limits, and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children. The section then covers the health and safety requirements; standards, training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Finally, Lead Agencies are asked to describe any exemptions for relative providers (98.16(l)). In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt. In either case, Lead Agencies are expected to identify and describe health and safety requirements for all providers receiving CCDF.

Note: When responding to questions in this section, the OCC recognizes that each state/territory identifies and defines its own categories of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important

to note that these requirements apply to all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

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

## 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

**5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check, identify, and describe all that apply, and provide a citation to the licensing rule.**

a. Center-based child care.

i. Identify the providers subject to licensing:

In Tennessee, an entity that provides care for three (3) or more hours per day for at least five (5) children not related to the primary caregiver must be licensed/regulated by the Lead Agency. Defined in the rules as: Child Care Center. Any place or facility operated by any person or entity that provides child care for three (3) or more hours per day for at least thirteen (13) children who are not related to the primary educator. There is also a small sub category of centers: Drop-In Child Care Centers. Although the requirements are intended to maintain adequate health, safety and supervision of children in a group setting, these centers are designed to provide short-term care.

Attendance for any given child may be short and erratic. Drop-in care is licensed, but it is more like a form of regulated casual care in which children are in care for short periods of time. For example, a child might attend for a few hours one month and not attend again for several weeks or months. Due to the limited time in care there is no expectation that children gain any developmental benefit from attending this setting. Due to the nature of care, these programs are not eligible to participate in the child care certificate program.

**ii. Describe the licensing requirements:**

The requirements seek to maintain adequate health, safety and supervision of children in a group setting and to promote developmentally appropriate care. Requirements include standards for equipment, ratios, staffing, program, health and safety, transportation, food, physical facilities, and care of children with disabilities/special needs.

**iii. Provide the citation:**

Licensure Rules for Child Care Agencies Chapter 1240-04-01

**b. Family child care. Describe and provide the citation:**

**i. Identify the providers subject to licensing:**

In Tennessee, an entity that provides care for three (3) or more hours per day for at least five (5) children not related to the primary caregiver must be licensed/regulating by the Lead Agency. Includes both family and group homes. Defined in the rules as: Family Child Care Home. Any place or facility which is operated by any person or entity that provides child care for three (3) or more hours per day for at least five (5) children, but not more than seven (7) children who are not related to the primary educator. Group Child Care Home. Any place or facility operated by any person or entity that provides child care for three (3) or more hours per day for at least eight (8) children who are not related to the primary educator, but not more than twelve (12) children or fifteen (15) children if approved for three (3) additional school-agers.

**ii. Describe the licensing requirements:**

The requirements are written to maintain adequate health, safety and supervision of children in a group setting and to promote developmentally appropriate care.

Requirements include standards for equipment, ratios, staffing, program, health and safety, transportation, food, physical facilities, and care of children with disabilities/special needs.

iii. Provide the citation:

Licensure Rules for Child Care Agencies Chapter 1240-04-01

c. In-home care (care in the child's own) (if applicable):

i. Identify the providers subject to licensing:

ii. Describe the licensing requirements:

iii. Provide the citation:

**5.1.2 Identify the CCDF-eligible providers who are exempt from licensing requirements. Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. Describe how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Do not include exempt relative care providers, this information will be collected in Section 5.6.**

a. License-exempt center-based child care. Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible center-based child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

There are approximately 1,879 agencies regulated by the Department of Education. These programs receive a certificate of approval rather than a license. In accordance with T.C.A. §§49-1-1101-1109, the Department of Education is mandated to inspect and approve all programs subject to the State Board's jurisdiction pursuant to T.C.A. §49-1-302(I). All public and private school-administered infant/toddler, preschool,

before and afterschool programs, as well as, approved Montessori programs, TEIS early intervention programs, school-based and community-based Lottery Education Afterschool Programs and 21st Century Community Learning Centers must be in compliance with Standards for Infant/Toddler, Preschool, and School-Age Extended Care Programs, Rules of the State Board of Education Office of the Commissioner Chapter 0520-12-01 Standards for School Administered Child Care Programs, adopted by the State Board of Education as defined in T.C.A. § 49-1-302(l) and certified by the Department of Education and verified through inspection by the Department's child care Program Evaluators. More than 300 of these agencies participate in the Child Care Certificate Program.

Boys and Girls Clubs exempt by statute, are the only exempt entities that are not normally regulated by the Lead Agency or the Department of Education that are eligible to participate in the Child Care Certificate Program.

Boys and Girls Clubs Tennessee Code Annotated § 71-3-503. Program and facilities exempt from licensing, provides: (A) Any program or facility operated by, or in affiliation with, any Boys and Girls Club that provides care for school-aged children and that holds membership in good standing with Boys and Girls Clubs of America and that is certified as being in compliance with the purposes, procedures, voluntary standards and mandatory requirements of Boys and Girls Clubs of America;

(B) Any such Boys and Girls Club that applies to participate in state or federally funded programs that require child care licensing by the state as a term of eligibility may elect to apply to the department for child care licensing and regulation. Upon meeting departmental standards, the Boys and Girls Club may be licensed as a child care center/provider;

(C) The department is hereby authorized to grant a waiver from any rule concerning grouping of children and adult/child ratios for child care centers to any Boys and Girls Club that falls within both subdivisions (a)(11)(A) and (a)(10)(A) and (B), and that is providing after-school child care to mixed groups of school-aged children;

These programs may choose to be licensed by the Lead Agency or regulated by the Department of Education. Less than 10 exempt clubs participate in the Child Care Certificate Program.

Boys and Girls Clubs are exempt from licensure by statute, but a number of clubs

have programs that are regulated under the Department of Education. A handful of clubs (five at this time), that are not regulated by the Department of Education fall under the Department of Human Services, because they participate in the Child Care Certificate program. They are the only exempt category defined in statute that is eligible to participate in the subsidy program.

[ii. Provide the citation to this policy:](#)

Chapter 0520-12-01 Standards for School Administered Child Care Programs  
Exempt Child Care Agency Contract Model 01-21-21

[iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.](#)

Statute requires the rules for approved agencies regulated by the Department of Education to be substantially the same as those for licensed care.

The Boys and Girls Clubs organization structure includes personnel dedicated to helping Clubs establish best practices that create and maintain safe settings for the children in their care. Care is also limited to older school-age children. Clubs generally have ratio guidelines in the 1:15 to 1:20 range. The Department has developed a health and safety checklist to monitor Boys and Girls Clubs that participate in the Child Care Certificate Program for compliance with CCDBG requirements and all applicable CCDBG requirements are outline in the Child Care Certificate Program contract.

[b. License-exempt family child care. Describe and provide the citation by answering the questions below.](#)

[i. Identify the CCDF-eligible family child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:](#)

Authorized Professionals There are approximately 10 individuals who do not meet the threshold for licensing (i.e. care for less than five children related to the primary educator)that participate in the Child Care Certificate Program due to parental choice. Although not specifically licensed, these individuals are monitored by the Department of Human Services for compliance with CCDBG requirements. The Lead Agency uses a health and safety checklist to complete inspections on these entities annually.



ii. Provide the citation to this policy:

Authorized Child Care Agency Contract Model 01-21-21 Authorized Professionals are not specifically referenced in statute because they don't meet the threshold for licensure.

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

The Department has developed a health and safety checklist to monitor Authorized Professionals that participate in the Child Care Certificate Program for compliance with CCDBG requirements and all applicable CCDBG requirements are outline in the Child Care Certificate Program contract.

c. In-home care (care in the child's own home by a non-relative): Describe and provide the citation by answering the questions below.

i. Identify the CCDF-eligible in-home child care (care in the child's own home by a non-relative) providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption.

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild. The Lead Agency makes available in home care for non-relatives in the child's home when the child requires special accommodations to meet individual needs. In such instances, these situations would be monitored using the protocols established for Authorized Professionals.

ii. Provide the citation to this policy:

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

## 5.2 Standards for Ratios, Group Size and Qualifications for CCDF Providers

Lead Agencies are required to have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.6.

### **5.2.1 Describe how the state/territory defines the following age classifications. For instance, Infant: 0-18 months.**

#### **a. Infant. Describe:**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies  
Chapter 1240-04-01 defines an infant as: "A child who is six (6) weeks through twelve (12) months of age.

#### **b. Toddler. Describe:**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies  
Chapter 1240-04-01 defines a toddler as: "A child who is thirteen (13) months through thirty (30) months of age.

#### **c. Preschool. Describe:**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies  
Chapter 1240-04-01 defines a pre-school child as: "A child who is thirty-one (31) months of age and who has not entered kindergarten to school-age".

#### **d. School-Age. Describe:**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies  
Chapter 1240-04-01 defines a school-age child as "a child who has entered kindergarten through seventeen (17) years of age.

**5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.**

a) Licensed CCDF center-based care

i. Infant

A. Ratio:

1:4

B. Group size:

8

ii. Toddler

A. Ratio:

1:6

B. Group size:

12

iii. Preschool

A. Ratio:

Ratios - Chart 1:

Twenty-four (24) Thirty-five (35) Months - 1:7

Three (3) Years - 1:9

Four (4) Years - 1:13,

Five (5) Years -1:16

B. Group size:

Maximum Group Size - Chart1:

Twenty-four (24) Thirty-five (35) Months - 14

Three (3) Years - 18

Four (4) Years - 20

## Five (5) Years -20

### iv. School-age

#### A. Ratio:

Chart 1 Ratio for School-age (Kindergarten and above) is 1:20

#### B. Group size:

Chart 1 - School-age (Kindergarten and above) - There is no maximum group size for this age group. By rule, there is no maximum group size for school-age children in TDHS licensed care as long as the ratio is met.

### v. Mixed-Age Groups (if applicable)

#### A. Ratio:

Chart 2 Ratios for Combined Groups:

Six (6) weeks - Thirty (30) months - Ratio: 1:5

Two (2) - Four (4) Years - Ratio: 1:4

Two and One-Half (2 1/2) - Three (3) Years - Ratio: 1:9

Two and One-Half (2 1/2) - Five (5) Years - Ratio: 1:11

Two and One-Half (2 1/2) - Twelve (12) Years - Ratio: 1:10

Three (3) - Five (5) Years - Ratio: 1:13

Four (4) - Five (5) Years - Ratio: 1:16

Five (5) - Twelve (12) Years - Ratio: 1:20

#### B. Group size:

Chart 2 Maximum Group Size for Combined Groups:

Six (6) weeks - Thirty (30) months - 10

Two (2) - Four (4) Years - 16

Two and One-Half (2 1/2) - Three (3) Years - 18

Two and One-Half (2 1/2) - Five (5) Years - 20

Two and One-Half (2 1/2) - Twelve (12) Years - 10

Three (3) - Five (5) Years - 22

Four (4) - Five (5) Years - 24

Five (5) - Twelve (12) Years - No Max

vi. If any of the responses above are different for exempt child care centers, describe the ratio and group size requirements for license-exempt providers.

Boys & Girls Clubs: Care in these facilities is limited to school-age children. Boys & Girls Club activities require continuous supervision, but the actual ratio may vary somewhat by location and activity based upon the standards adopted by a given site. Boys and Girls Clubs serve school-age children.

Ratios recommended by the Boys & Girls Clubs of America are as follows:

Activity/Program Type and Adult:Youth Ratio Drop-in 1:25; Instructional 1:20; Group Clubs 1:15; Teams 1:15; Day Camp 1:10; Day Trips 1:8; Overnight 1:6 (with minimum of 2 adults present); Swimming 1 Lifeguard: 25 Swimmers; Swimming 1 Spotter: 10 Swimmers

## 5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

b. Licensed CCDF family child care home providers:

i. Mixed Groups

A. Ratio:

Ratio and Group Size Family Home:

Maximum Number of Children and Ages(including children "related" to the primary educator under nine (9) years of age)

Seven (7) or fewer children; and No more than four (4) under two (2) years - One Educator  
Seven (7) or fewer children; and Five (5) or more under two (2) years - Two Educators

More than seven (7) children; and No more than four (4) under two (2) years - Two Educators

More than seven (7) children; and Five (5) or more under two (2) years - Three Educators

Ratio and Group Size Group Home (repeat for all care levels):

Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age)  
No more than twelve (12) children three (3) years of age or older - One Educator  
Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age)  
Up to nine (9) children under three (3) years of age; and No more than four (4)  
present under two (2) years of age - Two Educators  
Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age) Ten  
(10) or more under three (3) years of age - Three Educators

#### B. Group size:

Ratio and Group Size Family Home:

Maximum Number of Children and Ages (including children "related" to the primary educator under nine (9) years of age)

Seven (7) or fewer children; and No more than four (4) under two (2) years - One Educator  
Seven (7) or fewer children; and Five (5) or more under two (2) years - Two Educators

More than seven (7) children; and No more than four (4) under two (2) years - Two Educators

More than seven (7) children; and Five (5) or more under two (2) years - Three Educators

Ratio and Group Size Group Home (repeat for all care levels):

Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age)  
No more than twelve (12) children three (3) years of age or older - One Educator  
Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age)  
Up to nine (9) children under three (3) years of age; and No more than four (4)  
present under two (2) years of age - Two Educators  
Twelve (12) - Fifteen (15) (any number over twelve (12) must be school-age) Ten  
(10) or more under three (3) years of age - Three Educators

#### ii. Infant

##### A. Ratio:

See mixed group ratio in b. i. A. above

**B. Group size:**

See mixed group group size in b. i. B. above

**iii. Toddler**

**A. Ratio:**

See mixed group ratio in b. i. A. above

**B. Group size:**

See mixed group group size in b. i. B. above

**iv. Preschool**

**A. Ratio:**

See mixed group ratio in b. i. A. above

**B. Group size:**

See mixed group group size in b. i. B. above

**v. School-age**

**A. Ratio:**

See mixed group ratio in b. i. A. above

**B. Group size:**

See mixed group group size in b. i. B. above

**vi. If any of the responses above are different for exempt child care homes, describe the ratio and group size requirements for license-exempt family child care home providers.**

Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and no specific educational requirements for this category of provider.

**5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.**

c. Licensed in-home care (care in the child's own home):

i. Mixed Groups (if applicable)

A. Ratio:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

B. Group size:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

ii. Infant (if applicable)

A. Ratio:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing



care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**B. Group size:**

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**iii. Toddler (if applicable)**

**A. Ratio:**

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**B. Group size:**

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**iv. Preschool (if applicable)**

#### A. Ratio:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

#### B. Group size:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

### v. School-age (if applicable)

#### A. Ratio:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

#### B. Group size:

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing

care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**vi. Describe the ratio and group size requirements for license-exempt in-home care.**

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild. The Lead Agency makes available in home care for non-relatives in the child's home when the child requires special accommodations to meet individual needs.

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

**5.2.3 Provide the teacher/caregiver qualifications for each category of care.**

**a. Licensed Center-Based Care**

**i. Describe the teacher qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care:**

Each group shall have at least one (1) educator present who has a high school diploma or equivalent educational credential as recognized by the Department.

Prior to having contact with children, each new employee shall receive orientation in, and have a working knowledge of the following items:

Program philosophy and policies; Job description; Emergency health and safety procedures; Behavior management procedures; Detection, reporting, and prevention of child abuse; Procedures for receiving and releasing children; Safe sleep

procedures; Meal service and safe food preparation policies; Supervision during high risk activities such as eating and outdoor play; Food allergies; Expectations for communications with parent/guardian; Disease control and health promotion, including childhood obesity and the beneficial health impacts of physical activity; An overview of licensing requirements; and Information on risks of Cytomegalovirus (CMV) to female employees of childbearing age. Prior to having contact with children, each new employee shall complete training in the following areas: Shaken baby syndrome/abusive head trauma; and A minimum of two (2) hours pre-service training as recognized by the Department. The child care agency shall provide orientation on safe sleep practices before allowing any educator to assume infant-caregiving duties; An Educator must be at least 18 years of age. Exception: Sixteen (16) and seventeen (17) year-old students currently enrolled in a Department-recognized career and technical child care educational program may be used as floaters or assistant teachers provided, however, that they shall always be under the direct supervision of an adult educator and shall not be left alone with a group of children.

ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed:

High school diploma (or equivalent as recognized by state law), and Tennessee Early Childhood Training Alliance (TECTA) certificate for completing thirty (30) clock hours of the Administrator Orientation training or the equivalent as recognized by the Department. Four (4) years of full-time (paid or unpaid) experience with children in a group setting. The director of a single-site child care center shall be at least twenty-one (21) years of age.

iii. If any of the responses above are different for license-exempt child care centers, describe which requirements apply to exempt centers:

NA

iv. If applicable, provide the website link detailing the center-based teacher and director qualifications.

<https://publications.tnsosfiles.com/rules/1240/1240-04/1240-04-01.20190103.pdf>

## b. Licensed Family Child Care

i. Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care:

Educators and Primary Educators must be at least 18 years of age. Exception: Educators/Assistants sixteen (16) through seventeen (17) years of age may assist an educator and be counted as an adult in the adult: child ratio if the individual is: Never left alone with children; and Always under the direct supervision of a primary educator. Family home primary educators that received an initial license on or after the effective date of these rules shall be required to have earned a high school diploma or equivalent educational credential as recognized by state law. Group home primary educators shall have a high school diploma or equivalent educational credential as recognized by state law. Prior to having contact with children, each new employee shall receive orientation in, and have a working knowledge of the following items: Program philosophy and policies; Job description; Emergency health and safety procedures; Behavior management procedures; Detection, reporting, and prevention of child abuse; Procedures for receiving and releasing children; Safe sleep procedures; Meal service and safe food preparation policies; Supervision during high risk activities such as eating and outdoor play; Food allergies; Expectations for communications with parent/guardian; Disease control and health promotion, including childhood obesity and the beneficial health impacts of physical activity; An overview of licensing requirements; and Information on risks of Cytomegalovirus (CMV) to female employees of childbearing age. Prior to having contact with children, each new employee shall complete training in the following areas: Shaken baby syndrome/abusive head trauma; and A minimum of two (2) hours pre-service training as recognized by the Department. The child care agency shall provide orientation on safe sleep practices before allowing any educator to assume infant-caregiving duties.

ii. If any of the responses above are different for license-exempt family child care homes, describe which requirements apply to exempt homes:

Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and no specific educational requirements for this category of provider.

iii. If applicable, provide the website link detailing the family child care home provider qualifications:

<https://publications.tnsosfiles.com/rules/1240/1240-04/1240-04-01.20190103.pdf>

c. Regulated or registered In-home Care (care in the child's own home by a non-relative)

i. Describe the qualifications for licensed in-home child care providers (care in the child's own home) including any variations based on the ages of children in care:

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild. The Lead Agency makes available in home care for non-relatives in the child's home when the child requires special accommodations to meet individual needs.

The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Authorized Child Care Professionals are identified as individuals who may care for up to 6 children (four not related to the individual and up to two additional related children). There are no rules or restrictions regarding providing care for a maximum number of children under a particular age and there are no specific educational requirements for this category of provider.

ii. If any of the responses above are different for license-exempt in-home care providers, describe which requirements apply to exempt in-home care providers:

NA

## 5.3 Health and Safety Standards and Training for CCDF Providers

### 5.3 Health and Safety Standards and Training for CCDF Providers

The state/territory must describe its requirements for pre-service or orientation training and ongoing training. Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served. This training must address the required health and safety topics (658E(c)(2)(l)(i)) and the content area of child development. Lead Agencies have flexibility in

determining the number of training hours to require, and they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Lead Agencies must also have ongoing training requirements for caregivers, teachers, and directors who are caring for children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). Lead Agencies are to report the total number of ongoing training hours that are required each year, but they do not have to report these hours out by topic (658E(c)(2)(G)(iii)). Ongoing training requirements will be addressed in 5.3.13.

Both preservice/orientation and ongoing trainings should be a part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory.

States and territories must have health and safety standards

for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined in 98.2. Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)). Exemptions for relative providers' standards and training requirements will be addressed in question 5.6.3.

To certify, describe the following health and safety requirements for programs serving children receiving CCDF assistance on the following topics (98.16(l)) identified in questions 5.3.1 - 5.3.12. Note: Monitoring and enforcement will be addressed in subsection 5.4.

### **5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standards and training requirements.**

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Handwashing shall occur at least

at the following times but not limited to: After toileting and diapering. After handling bodily fluids. Prior to and after eating. Prior to and after food preparation. Routine cleaning and sanitizing of tables, chairs, high chairs and toys that children place in their mouth, dishes and utensils, and the floor. Children must be appropriately immunized with limited exceptions for medical reasons or religious tenets and practices and a grace period for children of homeless families. Children that are ill should be isolated until parents are notified and can pick them up.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for prevention and control of infectious disease include but are not limited to provisions for:

- Immunizations as a requirement for enrollment
- Handwashing before food prep, before eating, after assisting children with toileting, etc.
- Cleaning and sanitizing eating surfaces using a two-step process and cleaning toys.
- Procedures for diapering set-up, near a sink and away from food prep or serving areas and where supervision of other children can be maintained.
- Routine cleaning of bedding, and separation of cribs, cots, and/or mats
- Handling sick children, recognizing symptoms and how to respond, how to give medications and information on isolating sick children until parents can pick them up in an area that can easily be supervised and sanitized.
- Time outside to experience fresh air/sunshine

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training,



emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status

(i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

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

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Infants should be placed on their backs for sleeping. Infants should be touched every 15 minutes to check for breathing. No soft bedding, blankets or pillows (Soft bedding that is prohibited includes, but is not limited to, pillows, bumper pads, blankets, quilts, comforters, stuffed toys, and other soft items). Infants shall only sleep in a safety approved crib or other equipment approved by CPSC and ASTM safety standards for infant sleep (play pens, cribs, play yards). Infants shall not sleep in any other equipment, such as, but not limited to, a car safety seat, bouncy seat, highchair, swing or the floor. Infants who arrive at the facility asleep or fall asleep in such equipment or on the floor shall be transferred to a safety approved crib or other equipment approved for infant sleep. Staff training on prevention of SIDS and safe sleep practices prior to working with infants.

Standards for Children Over 12 Months of Age -Individual cots or two-inch (2") mats shall be provided for children ages twelve(12) months through five (5) years. -Each crib, cot, bed or mat shall be labeled with the child's name or a corresponding code to ensure that each child sleeps on his or her own bedding. 1. If a cot or mat is used by more than one child throughout the day, it shall be properly labeled and sanitized between uses, with a solution appropriate for general cleaning. -Cribs and play yards must comply with CPSC requirements. -Nesting beds are prohibited. -Original manufacturers' mattresses and sleep surfaces upholstered with a safe, waterproof material shall be used in each crib and play yard. A clean sheet shall be used to cover each child's sleeping surface. A blanket or covering shall be available to each child age thirteen (13) months or older. Positioning of cots, cribs and sleeping mats. -In order to avoid the spread of airborne diseases children shall be positioned on mats in a face to feet alternating pattern, unless they are separated by an appropriate solid barrier. -Cots, cribs, and mats shall be positioned at least eighteen inches (18") apart to allow an adult to walk between them, unless they are separated by a solid barrier. - If barriers are used, they shall be arranged to permit staff to observe and have immediate access to each child.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and

safety topics. The expectations for prevention of sudden infant death/safe sleep practices include but are not limited to provisions for:

- Placing the baby on his/her back on a firm tight-fitting mattress in a crib that meets current safety standards (do not place a baby on sofa, soft mattress, pillow, or other soft surfaces to sleep).
- Infants 12 month and younger not covered with a blanket when sleeping.
- Monitoring sleeping infants by touch every 15 minutes to check breathing, body temp, and sleep position.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06  
Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

- Pre-Service  
 Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

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

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Each agency shall develop written procedures regarding the administration, handling, and storage of medication. Each agency shall obtain a written authorization to administer medication from medical provider and/ or parent / guardian. The authorization shall include the name of the medication, the dosage, the method of administration and the time when the medication is to be administered. When medication is administered to a child, the designated person shall list the date, time, dosage, side effects and the administering party's signature on the medication log. The medication log shall be reviewed with parent each day medication is administered and the parent shall sign. Medication shall be kept in a locked container / area unless it is deemed emergency medication. All staff members shall receive training regarding administration of medication.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with

children. This module includes standards/expectations for each of the health and safety topics. The expectations for administration of medications include but are not limited to provisions for:

- Parent written authorization and instructions
- Give medication that is only in the original container, not expired, labeled with child's name.
- Administered by designated staff person(s).
- Documentation of dosage and times administered and name of person administering.
- Stored in a locked compartment or container (inaccessible to children).

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care

Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Rules of the Department of Human Services - Licensure Rules for Child Care

Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

**iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.**



Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

### **5.3.4 Prevention of and response to emergencies due to food and allergic reactions.**

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: A written plan of action or treatment plan shall include the name of medication, dosage of medication, method of administration of medication and specific symptoms that indicate the need for medications. The file of any child with an allergy should contain written instructions from the parent / guardian or physician about special diets such as dietary restrictions or dietary modifications. The agency should develop and implement written policy on response to emergencies due to food allergies.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with

children. This module includes standards/expectations for each of the health and safety topics. The expectations for response to emergencies due to food and allergic reactions include but are not limited to provisions for:

- Guidance about the difference between food intolerance and food allergies and how the body responds.
- Information about food sensitivities may develop or intensify as children grow.
- Signs and symptoms.
- Avoiding allergens.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895  
Health and Safety Checklist-HS 3256  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06  
Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

**iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.**

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

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

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Identify safety hazards and concerns and immediately remove, repair or prohibit use to protect children. Maintain records of inspections and repairs. Comply with building and fire codes. Unstable and heavy equipment, furniture and any items that could tip over or be pulled over should be securely anchored such as televisions, cubbies, shelves, etc. The outdoor play area shall be fenced to prevent children from wandering onto busy streets and highways. Hazardous materials such as cleaning supplies, poisonous materials, medicines, alcoholic beverages or hazardous personal care items shall be inaccessible to children. Hazardous materials shall not be stored with food and food related materials.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for building/physical premises safety including protection from hazards, bodies of water, and vehicular traffic include but are not limited to provisions for:

- Maintaining a safe environment and being prepared for emergency situations.
- Supervision that allows you to hear children at all times and positioning yourself so you can see children with a quick glance.
- Including items in the environment that match their individual abilities.
- Increased supervision for infants to prevent falls (never placing an infant on tables, beds, counter tops or left unattended in high chairs or strollers).
- Small items such as coins, beads, buttons, marbles, beans, etc. kept away from infants.
- Handouts about BUMO seats and Crib Standards for infants.
- Adequate hydration for toddlers outside on hot sunny days.
- Adequate supervision of toddlers
- Sign in and out procedures.
- Minimize tripping hazards on playgrounds, sufficient ground cover, closed S-hooks, equipment in good repair (equipment hazards repaired or removed immediately).
- Microwaves, crock pots, bottle warmers and their cords out of reach of children.
- Identification of common environmental hazards that include choking, poisoning, burning, tripping/falling, dehydration, and ingestion of foreign objects.
- Close supervision around bodies of water - adult within arm's length during wading or water play activities.
- Ratios for water activities should be 1:1 for infant/toddlers.
- Extra vigilant during transportation (utilize proper child restraints, monitor vehicle temps, and conduct headcounts of children.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

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

#### a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Programs should implement practices to identify and prevent shaken baby syndrome and abusive head trauma. All educators, directors, substitutes and volunteers should receive training on preventing shaken baby syndrome and abusive head trauma; recognition of potential signs and symptoms of shaken baby syndrome and abusive head trauma; strategies for coping with a crying, fussing, or distraught child; and the development and vulnerabilities of the brain in infancy and early childhood.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for prevention of SBS/ABHT, and child maltreatment include but are not limited to provisions for:

- Explaining the term and seeking medical attention immediately if you suspect that a child has been shaken.
- Coping measures/strategies for with infants that continue to when all their routine needs have been met.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.



Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

**5.3.7 Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.**

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: Each agency should have an emergency preparedness plan on file. All staff shall receive training on the emergency preparedness plan so that they will know the proper procedures to take in the event of any disaster or emergency situation. Evacuation routes posted and emergency drills conducted using evacuation routes. Emergency numbers shall be posted in all classrooms. Parents shall be made aware of emergency procedures and evacuation routes.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for emergency preparedness and response planning include but are not limited to provisions for:

- Having an emergency or disaster response plan in place to address emergency medical situations and emergencies resulting from natural disasters or man-caused events such as violence in or near a child care facility. (use the emergency preparedness plan template as a guide).
- Review of plans every three months.
- Portable records for evacuation.
- Emergency contact list (families of children), updated regularly.
- Plans for evacuation/sheltering in place as required by the situation.

- Practice of emergency drills.
- Posting of emergency numbers/procedures in an accessible location.
- Well-stocked first aid kit
- Training for all staff in first aid CPR.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

### **5.3.8 Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants.**

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: All toxic substances should be inaccessible to children and should not be used when children are present. Toxic substances should be used as recommended by the manufacturer and stored in the original labeled containers. The telephone number for the poison control center should be posted and readily accessible in emergency situations. Wear disposable gloves when handling blood and body excretions or secretions and for diapering and toileting when blood is visible. Gloves should also be worn when assisting with oral care and whenever the care provider has open cuts or broken skin that drains. Use bio hazard bags or plastic bags when handling blood, soiled diapers, vomit or any other type of bodily fluids other disposable articles soiled with body secretions and excretions. Wash toys, furniture and any other articles soiled with blood and bodily excretions with a cleaning agent.

All child care providers serving children receiving CCDF assistance are required to

complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for storage of hazardous materials/disposal include but are not limited to provisions for:

- Locking up all chemicals, medications, any substances marked as keep out of reach.
- Procedures for protecting yourself from exposure to blood or other potentially infectious materials and the use of personal protective equipment (glove use/replacement).
- Washing hands after removal of gloves or other PPE.

The Exempt Agency Health & Safety Checklist (Hs-3256) is used to monitor CCDBG requirements. The agency is expected to follow the requirements under the terms of the contract and are monitored based on compliance with items listed on the Health & Safety Checklist document.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.



iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

### **5.3.9 Precautions in transporting children (if applicable).**

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: The agency shall have a written plan on how to communicate emergencies during transportation. A monitor is required for transportation when transporting 4 or more children younger than kindergarten and during trips over 30 minutes as well as when transporting 20 or more children 5 or older or 4 or more non-ambulatory children. A passenger log must be used while loading and unloading that is used to ensure that children are not left on vehicles. All

drivers/monitors must have first aid/CPR certification. Vehicles must have required safety equipment (fire extinguisher, reflective triangles, first aid kit, seat-belt cutter, bloodborne pathogenic clean-up kit, working flashlight).

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for transporting include but are not limited to provisions for:

- Use of a passenger log to record the name of each child.
- Updating the passenger log when loading and unloading children and conducting a walk through of the vehicle after children have been unloaded.
- All person responsible for transportation including drivers, monitors, and log reviewers to complete and document Lead Agency recognized transportation training.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

#### b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

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DOE Approved Child Care Agency Contract

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ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

### **5.3.10 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR).**

#### **a. Standard(s)**

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: First aid and CPR should be current and on file. At least one person shall be on the premises at all times with certification in CPR and First Aid. All Staff shall be trained in CPR and First Aid requirements.

All child care providers serving children receiving CCDF assistance are required to

complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for first aid and CPR include but are not limited to provisions for:

- All staff providing direct care to children should have up-to-date documentation of training in pediatric first aid and pediatric CPR.
- Records of successful completion of training kept in personnel files.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895  
Health and Safety Checklist-HS 3256  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
Exempt Child Care Agency Contract

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06  
Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07  
Authorized Child Care Professional Contract  
DOE Approved Child Care Agency Contract  
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**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

**iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.**

- Pre-Service
- Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

**5.3.11 Recognition and reporting of child abuse and neglect. Note: The description must include a certification that child care providers within the state comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).**

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Standards for licensed child care programs include: All child care agency staff must receive documented training on proper procedures to report child abuse and neglect annually. Agencies are required to develop reporting policy that is compliant with our state child welfare agency (DCS) requirements. The DCS Central Intake Child Abuse Hotline number must be posted at each telephone at the child care agency.

Suspicious of child abuse and neglect must be reported directly to DCS or law enforcement. Documentation of any injuries or obvious marks must be made by the receiving educator upon child's arrival at the child care facility.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for recognition and reporting of child abuse and neglect include but are not limited to provisions for:

- Clarifying who is a "mandated reporter" in Tennessee ( any person who has contact with children in a professional capacity.
- Any suspicion of knowledge of child abuse or neglect must be reported (including any instance that may occur at the hand of another staff member)
- Suspicions of abuse or neglect must be reported directly to the Department of Children's Services (phone number provided during training).

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01: <https://publications.tnsosfiles.com/rules/0520/0520-12/0520-12-01.20210630.pdf> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care



Agencies Chapter 1240-04-01

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**b. Pre-Service and Ongoing Training**

**i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.**

Rules of the Department of Human Services - Licensure Rules for Child Care

Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

**ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?**

All licensed providers and exempt providers that participate in the Child Care Certificate Program are required to complete a specified pre-service training module that covers all the health and safety training topics prior to contact with children. These providers are also required to complete at least 6 hours of training in the health and safety topics annually. It is recommended that these educators cycle through all the health and safety training topics every three years.

**iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.**

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

**5.3.12 PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b**

a. PLEASE ENTER 'NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE QUESTION 5.3.12b

i. Please enter 'NA' below

NA

ii. Please enter 'NA' below

NA

iii. Please enter 'NA' below

NA

5.3.12 Child Development. Lead Agencies are required to describe in their plan how training addresses child development principles, including the major domains of cognitive, social, emotional, physical development and approaches to learning (98.44(b)(1)(iii)).

b. Pre-Service and Ongoing Training

i. Describe the training content and provide the citation(s) for the training requirement(s). Include citations for both licensed and license-exempt providers

Standards for licensed child care programs include: The preservice training module required for all CCDF providers includes content on child development that covers the domains of development and how the domains are interrelated and sequential.

Generally, the training provides examples of development milestones demonstrated by the end of the age range and indicate in the standards. Reference that examples of developmental skills should be considered within a cultural context. When training include planning activities in child care programs for small groups of young children special consideration should be given to children whose home language is not English as well as to children with special needs. Developmental standards in child care settings standards can be observed during routines, play, and transitions and emphasis in training includes how young children's overall development relates to their relationship with their caregiver.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for child development include but are not limited to provisions for:

- Explaining the domains of development (social/emotional, intellectual/cognitive, physical/motor, language)
- Understanding that development is sequential, and that learning is an integrated process across all developmental domains.
- Understanding developmentally appropriate practice (everything the child does and everything you provide for the child needs to be a good fit for the child's abilities, interests, stage of development, and is culturally relevant.
- An overview of environments that includes information on schedules/routines, balance of activities, learning centers, diversity, and that materials must be available and accessible.
- Interacting with children, frequently, during routines like meals, diapering/toileting,

play activities and when children want or request interactions (types of interactions, responding to infants, toddler communication, preschooler emotions, peers relationships, inclusion of children with special needs, and multi-age groups are covered).

- Building relationships with families how families influence a child's development (reciprocal relationships, appreciation of diversity, family participation, and respect are addressed in this portion).

Before You Begin Health and Safety Standards:

<https://www.tn.gov/content/dam/tn/human-services/documents/Before%20You%20Begin%20Training%20Standards.pdf>

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01-.06

Rules of the Department of Education - Standards for School Administered Child Care Programs Chapter 0520-12-01-.07

Health and Safety Checklist-HS 2895

Health and Safety Checklist-HS 3256

Authorized Child Care Professional Contract

DOE Approved Child Care Agency Contract

Exempt Child Care Agency Contract

ii. Describe any variations in training requirements for this topic. Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

Exempt child care agencies regulated by the Department of Education are subject to Rules of the Department of Education - Standards for School Administered Child Care Programs - Chapter 0520-12-01:

<https://publications.tnsosfiles.com/rules/0520/0520.htm> Statute requires that these standards are substantially the same as those for licensed child care agencies.

Authority over exempt entities is limited to the provider contract that regulates their participation in the child care certificate program. The contract requires that they adhere to all applicable CCDBG requirements including requirements for training, emergency preparedness, immunization grace period, child abuse reporting, inspections, ratios/group size, and background checks. Exempt agencies are also monitored using a health and safety checklist that includes provisions for all CCDBG requirements.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Pre-Service

Orientation within three (3) months of hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

Yes

No

v. How do providers receive updated information and/or training regarding this topic? This description should include methods to ensure that providers are able to maintain and update their understanding of child development principles as described in the topic above.

An array of trainings on the health and safety topics are made available to all licensed providers and agencies that participate in the Child Care Certificate Program. These trainings are provided free of charge by the Lead Agency through the Tennessee Online Child Care Training System (TECTA) and Child Care Resource & Referral (CCR&R). Information about updates are communicated to providers through direct communications from the Lead Agency or the TECTA/CCR&R.

### **5.3.13 Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii):**

#### **a. Licensed child care centers:**

Center directors are required to have 30 hours of administrator training or complete one academic course and 6 hours of health and safety during the first year and 24 hours annually thereafter.

Assistant center directors are required to have 18 hours of annual training annually.

Center educators are required to have the 16 hours of training during the first year and

12 hours annually thereafter.

**b. License-exempt child care centers:**

Directors, assistant directors, teachers, and assistant teachers in centers regulated by the Department of Education are required to have 30 hours of annual professional development.

Exempt centers providers that participate in the Child Care Certificate Program are required to have 6 hours of annual health and safety training.

**c. Licensed family child care homes:**

Family and group home primary educators are required to have 18 hours of annual training.

Family and group home educators are required to have 12 hours of annual training.

**d. License-exempt family child care homes:**

Exempt home providers that participate in the Child Care Certificate Program are required to have 6 hours of annual health and safety training.

**e. Regulated or registered In-home child care:**

In-home care is limited to circumstances where the child resides in the providers home and the child is related to the provider i.e. a child or grandchild. The Lead Agency only allows in-home care under these circumstances. The training requirements for exempt CCDF providers would be applied to these settings (a minimum of 6 hours of health and safety training annually).

**f. Non-regulated or registered in-home child care:**

NA

**5.3.14 In addition to the required standards, does the Lead Agency require providers to comply with the following optional standards? If checked, describe the standards, how often the training is required and include the citation. (Please check all that apply)**

a. Nutrition:

Describe:

Standards for licensed child care programs include: All meals and snacks served by the child care agency should be in accordance with USDA Child and Adult Care Food program nutrition guidelines (participants receive training on the guidelines annually and ongoing training sessions and TTA is available upon request). All staff should receive training on proper nutrition guidelines. During meal time and snacks, educators should have discussions with children about nutrition and healthy eating.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for nutrition include but are not limited to provisions about:

- Other ways to promote healthy lifestyles (providing healthy meals, snacks and encouraging children to make healthy choices)
- Including book and discussions on nutrition and health and providing resources for parents.
- USDA Meals and Snacks guidelines are provided as a resource handout.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01  
Provider Contracts  
Health and Safety Checklists

b. Access to physical activity:

Describe:

Standards for licensed child care programs include: All educators/staff should receive training regarding the benefits of physical activity. An opportunity for all children in care 3 hours or more for all children of all ages. Children should have indoor and outdoor physical activity on a daily basis and have opportunities to experience a variety of weather conditions between 32 degrees and 95 degrees Fahrenheit. Specifications for outdoor play and moderate to vigorous indoor or outdoor physical activity is specified as follows: Weather permitting, infants shall be taken outside at least once per day, Toddlers and preschoolers shall have sixty (60) to ninety (90) minutes of outdoor play per day (Exception: Indoor activity can be increased if

adverse weather does not permit outdoor play), Toddlers shall have sixty (60) to ninety (90) minutes of moderate to vigorous physical activity per eight (8) hour day, Preschoolers shall have ninety (90) to one hundred and twenty (120) minutes of moderate to vigorous physical activity per eight (8) hour day. Children shall be properly dressed and the length of time outside adjusted according to the weather conditions and the age of the children.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for physical activity include but are not limited to provisions about:

- Encouraging movement and exercise for all children through individual activities or for older children group games they enjoy.
- Time outside providing opportunities for children to enjoy fresh air and sunshine and the change of pace that outside play offers.

Rules of the Department of Human Services - Licensure Rules for Child Care

Agencies Chapter 1240-04-01

Provider Contract

Health and Safety Checklist

#### c. Caring for children with special needs:

##### Describe:

Standards for licensed child care programs include: Agency staff should receive training that is relevant to the special needs of each child in care. Agency staff should consult with parents and the appropriate service providers regarding techniques used in the home to ensure the safety of any child identified with special needs. The file of each child should contain documentation relevant to special needs. All agency staff should receive training on special needs and inclusion.

All child care providers serving children receiving CCDF assistance are required to complete the Before You Begin: New Educator module prior to having contact with children. This module includes standards/expectations for each of the health and safety topics. The expectations for caring for children with special needs include but are not limited to provisions about:



- Including children with special needs in aspects including interactions and activities (making modifications as needed).
- Evaluating your program to meet the needs of each child (making modifications to schedules, spaces where needed).
- Providing opportunities for inclusive interactions.

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01  
 Provider Contract  
 Health and Safety Checklist

- d. Any other areas determined necessary to promote child development or to protect children’s health and safety (98.44(b)(1)(iii)).

Describe:

## 5.4 Monitoring and Enforcement Policies and Practices for CCDF Providers

### 5.4.1 Enforcement of licensing and health and safety requirements.

Lead agencies must certify that procedures are in effect to ensure that all child care providers caring for children receiving CCDF services comply with all applicable state and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers, or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.4.2.

- a. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Standards as described in Section 5.3.

Licensed agencies and exempt agencies that participate in the child care certificate program are monitored by the Lead Agency. Lead Agency staff conduct visits, review records, and investigate complaints to monitor for compliance with all requirements and standards. The Department of Education (TDOE) has responsibility for regulation of exempt agencies under their jurisdiction and follow similar procedures to monitor for compliance with their standards and all CCDBG requirements.

b. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Training as described in Section 5.3.

Licensed agencies and exempt agencies that participate in the child care certificate program are monitored by the Lead Agency. Lead Agency staff conduct visits and reviews records/documentation to monitor for compliance with all training requirements. The Department of Education (TDOE) has responsibility for regulation of exempt agencies under their jurisdiction and follow similar procedures to monitor for compliance with their training requirements and all CCDBG training requirements. Moving forward the TNPAL workforce registry will become the central repository for all required CCDF training requirements.

c. To certify, describe the procedures to ensure that CCDF providers comply with all other applicable state and local health, safety, and fire standards.

Licensed agencies and exempt agencies that participate in the child care certificate program are monitored by the Lead Agency. Lead Agency staff request fire and health inspections as part of the initial licensing process and annually thereafter. Copies of required local permits are also documented as part of the prelicensure process. The Department of Education (TDOE) has responsibility for regulation of exempt agencies under their jurisdiction and follow similar procedures to monitor for compliance with state and local health, safety, and fire standards. Exempt agencies participating in the Child Care Certificate Program are monitored annually for compliance with health safety and fire standards.

#### **5.4.2 Inspections for licensed CCDF providers.**

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a. Licensed CCDF center-based child care

i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards.

A temporary or an annual license shall not be issued unless all of the following requirements are met:

An initial and annual inspection verifying compliance with all applicable state and local fire and environmental requirements which includes:

Inspection by the State Fire Marshal's Division of the Tennessee Department of Commerce and Insurance and/or local fire authority; and

The General Environmental Division of the Tennessee Department of Health. The physical facilities (indoor and outdoor) present no apparent hazards; and

The physical facilities are otherwise deemed appropriate by the Department for the safe care of children.

The agency shall maintain documentation of required inspections and the approvals. All agencies shall continue to maintain compliance with all applicable codes throughout the licensing year and any updated standards issued by the Department of Health and the State Fire Marshal.

The agency shall not be located in a building used for purposes which would be hazardous to the children.

The agency shall not be located in a building that would prohibit outdoor play.

An inner-city agency may request an exception from the Department pursuant to the requirements for "Outdoor Play" found in 1240-04-01-.15(3).

All licensed child care agencies shall ensure that the physical facilities are safe, clean, in good repair and free from hazards and clutter. Each agency shall have at least one working telephone available at the agency and the number shall be made available to parents.

Outdoor play areas shall have a minimum of fifty (50) square feet of usable play space per child, be properly maintained and be enclosed by a fence or barrier that is at least four (4) feet in height.

The pre-licensure inspection process includes inspections by the following:

- Lead Agency Child Care Licensing Consultant - Determines compliance with all applicable standards including CCDF health and safety requirements and documents compliance with any required external inspections (fire and health).
- State Fire Marshal's Division of the Tennessee Department of Commerce and Insurance and/or local fire authority - Conducts fire inspections according to state and local requirements.
- General Environmental Division of the Tennessee Department of Health -Conducts general health facility and food service (if applicable) inspections.

[ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care center providers.](#)

Child Care Licensing Consultants monitor licensed child care agencies for compliance with the rules of the Department of Human Services and statutes and to provide technical assistance to ensure the health and safety of children in licensed child care agencies. All licensed child care facilities must receive a minimum of one (1) announced evaluation visit during the licensing year. Announced re-evaluation visits must cover all areas of the child care licensing rules. Unannounced agency visits are conducted based on the agency's licensing year and the number of unannounced visits are determined by an agency's star rating. Licensed child care centers receive a minimum of three (3) to six (6) unannounced visits annually based upon the agency's star rating and licensing year.

All licensed child care centers receive an annual fire inspection conducted by the

State Fire Marshal's Division of the Tennessee Department of Commerce and Insurance and/or local fire authority. All licensed child care centers receive an annual general health and food service (if applicable) inspection annually by the General Environmental Division of the Tennessee Department of Health.

During each unannounced agency visit, Licensing Consultants must, at a minimum, review all of the major high-risk areas and be observant for safety hazards. The high-risk areas include:

- Failure to follow any rule related to the proper transportation of children by employees, substitutes, volunteers, agents or contractors of the agency;
- Adult: Child Ratios;
- Failure to complete required background checks on staff;
- Corporal punishment/inappropriate discipline;
- Lack of Insurance;
- Failure to report suspicion of abuse or neglect;
- Falsification of documents required by the Department;
- Failure to have CPR/First Aid certification as required by the Department;
- Lack of proper supervision of children; (X) Failure to properly dispense or store medications;
- Failure to remove persons from access to children following notification of a prohibited criminal background or pending criminal charge or following notification of the person's validated status as a perpetrator of child abuse;
- Failure to properly store hazardous items such as, but not limited to, cleaning products, pesticides, hazardous chemicals, or other poisonous items; and
- Failure to properly remove or secure firearms within the child care agency area which are under the ownership or control of the agency, or its staff substitutes or other persons permitted access to the children, or failure to prevent exposure of children in the agency's care to firearms which are under the control of the agency, or its staff, substitutes or other persons who have been permitted by the agency to have access to the children.

If violations are observed during any agency visit, the Licensing Consultant will assist the child care agency staff in completing a Plan of Corrective Action.

Any major high-risk violations that are not corrected during the visit require a five

(5)day follow-up visit.

iii. Identify the frequency of unannounced inspections:

- A. Once a year  
 B. More than once a year

Describe:

Unannounced agency visits are conducted based on the agency's licensing year and the number of unannounced visits are determined by an agency's star rating as follow:

Full Year Programs\*:

- Zero star, new agencies and agencies declining to participate in the star rating - Six(6) unannounced visits
- One (1) star agencies - Five (5) unannounced visits
- Two (2) star and three (3) star agencies - Four (4) unannounced visits

Nine (9) and ten (10) month programs\*:

- Zero star, new agencies and agencies declining to participate in star rating - Four(4) unannounced visits
- One (1) star agencies - Four (4) unannounced visits
- Two (2) star and three (3) star agencies - Three (3) unannounced visits

\*Any agency that provides transportation will receive an additional unannounced agency visit.

\*Any agency on a Safety Plan will receive weekly unannounced agency visits until the Safety Plan is lifted. It is at the discretion of the Program Supervisor to alter this schedule.

\*An agency may receive additional visits based on complaints, legal enforcement actions and follow-up visits related to violations.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that child care center providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

Visit frequency is based upon the determined by the agency's star rating as described

in the response above.

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Tennessee Department of Human Services Administrative Policies and Procedures  
13.02 Monitoring for Compliance .

### 5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

#### **b. Licensed CCDF family child care home**

i. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards

Same as center based center based care described in 5.4.2 a. above

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF family child care providers.

Same as center based center based care described in 5.4.2 a. above

iii. Identify the frequency of unannounced inspections:

- A. Once a year  
 B. More than once a year

Describe:

Same as center based center based care described in 5.4.2 a. above

iv. If applicable, describe the differential monitoring process and how these inspections ensure that family child care providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

Same as center based center based care described in 5.4.2 a. above

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Tennessee Department of Human Services Administrative Policies and Procedures 13.02 Monitoring for Compliance

#### 5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

c) Licensed in-home CCDF child care

i. Does your state/territory license in-home child care (care in the child's own home)?



No (Skip to 5.4.3 (a)).

Yes. If yes, answer A-D below:

A. Describe your state/territory's policies and practices for pre-licensure inspections of licensed in-home care (care in the child's own) providers for compliance with health, safety, and fire standards.

NA

B. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care in-home care (care in the child's own home) providers.

NA

C. Identify the frequency of unannounced inspections:

1. Once a year

2. More than once a year

Describe:

NA

D. If applicable, describe the differential monitoring process and how these inspections ensure that in-home care (care in the child's own providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

NA

E. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF in-home care (care in the child's own home) providers.

NA

### 5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

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

The child care licensing agency within the Lead Agency is responsible for pre-licensure inspections and unannounced inspections of licensed CCDF providers.

### **5.4.3 Inspections for license-exempt center-based and family child care providers.**

The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Inspections for relative providers will be addressed in question 5.6.4. At a minimum, the health and safety requirements to be inspected must address the standards listed in subsection 5.3 (98.41(a)).

To certify, describe the policies and practices for the annual monitoring of:

a. License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

Child care centers regulated by the Department of Education that participate in the Child Care Certificate Program are subject to rules that are substantially the same as the rules for child care centers regulated by the Department of Human Services. Link to rules for school-based programs: <https://publications.tnsosfiles.com/rules/0520/0520.htm> These agencies receive at a minimum one announced and one unannounced visit annually. Additional unannounced visits are conducted in response to complaints and violations as needed. Fire and health inspections for school-administered child care are conducted according to the Department of Education requirements, which is once per year.

i. Provide the citation(s) for this policy or procedure

Rules of the State Board of Education Office of the Commissioner Chapter 0520-12-01 Standards for School Administered Child Care Programs.

b. License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

Authorized Professionals (individuals that care for up to four children who are not related to the educator). In order to participate in Child Care Certificate Program these entities enter into a contract with the Lead Agency that includes compliance with all CCDF requirements including monitoring. Authorized Professionals There are approximately 10 individuals who do not meet the threshold for licensing (i.e. care for less than five (5) children related to the primary educator) that are currently participating in the Child Care Certificate Program. These individuals are either related or unrelated to the child and are selected based on parental choice. Although not specifically licensed, these individuals are monitored by the Department of Human Services for compliance with CCDF requirements annually. The Lead Agency uses a health and safety checklist that includes fire safety elements to complete inspections on these entities annually.

Health and Safety Checklist-HS 2895

i. Provide the citation(s) for this policy or procedure

Tennessee Department of Human Services Administrative Policies and Procedures 11.32 Authorized Child Care Professional Home Visits.

#### 5.4.4 Inspections for license-exempt in-home care (care in the child's own home).

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. A child's home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted on-site inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission prior to entering the home for inspection (98.42(b)(2)(iv)(B)).

a. To certify, describe the policies and practices for the annual monitoring of license-exempt in-home care, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used.

Not Applicable - The Lead Agency currently does not have any in-home providers. However, if they existed, they would need to meet the same requirements as Authorized Child Care Professionals. Licensing Consultants under the Department of Human Services would have responsibility for monitoring these settings. In such circumstances the setting would receive one announced visit annually and the health and safety checklist used for Authorized Child Care Professionals would be used to conduct the monitoring visit.

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild. The Lead Agency makes available in home care for non-relatives in the child's home when the child requires special accommodations to meet individual needs.

b. Provide the citation(s) for this policy or procedure.

The policy applicable to Authorized Providers would apply in this situation. Authorized Child Care Professional Home Visits Policy 11.32

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

The Lead Agency only permits relative care in circumstances when the child in care resides in the provider's home, i.e. a child or grandchild. The Lead Agency makes available in home care for non-relatives in the child's home when the child requires special accommodations to meet individual needs. Licensing Consultants under the Department of Human Services would have responsibility for monitoring these settings.

#### **5.4.5 Licensing Inspectors (or qualified inspectors designated by the Lead Agency).**

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the 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

Licensing inspectors complete a new employee training academy that equips them with the knowledge needed to be successful.

b. To certify, describe how inspectors and monitors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

The Lead Agency's Office of Talent Management-Learning and Development (Child Care and Community Services Division) is responsible for providing New Employee Training for new Child Care Services licensing staff, including Licensing Consultants

and Supervisors. New licensing employees are required to successfully complete a three-week academy that covers the policies and procedures that Licensing Consultants and Supervisors need be aware of in order to monitor child care agencies according to Departmental requirements. This academy includes systems training on BacTrak and the Tennessee Licensed Care System (TLCS) as well as fundamental professional skills. Each employee is required to undergo assessments throughout training and a final comprehensive assessment at the conclusion of the academy to gauge knowledge retention. The Office of Talent Management also provides ongoing and refresher trainings upon request. Among the Child Care Services licensing policies included in the new employee academy are:

Chapter 1- Introduction to Licensing (which includes Ethics and Customer Service)

Chapter 2- Legal Authority and the Organization of the Law

Chapter 3-The Licensing Process

Chapter 4-Child Care Report Card & Star Quality Program

Chapter 5 (13.02) -Monitoring for Compliance

Chapter 6-Criminal Background Checks and State Registry Reviews

Chapter 7 (13.03) -Investigation Complaints at Child Care Agencies

Chapter 8-General Enforcement Tools and the Legal Enforcement Process

Chapter 9-Clarifications

Chapter 10-Case Record Documentation, Organization and Forms

- Introduction to TLCS
- TLCS: Navigation
- BacTrak (background check system)
- Providing Effective Technical Assistance
- Constructing a Narrative
- There are also some online modules that request new staff to complete and discuss/verify with their supervisor.
  - CCS Serving Families Experiencing Homelessness
  - CCS Obesity in Early Care
  - CCS CCDBG Health and Safety Training Requirements Overview
  - Child and Adult Care Licensing Expulsion and Suspension Policy Statement
- Additional fundamental skills that have been developed but not yet offered include:
  - CCS Problem Analysis
  - Cultural Competency
  - CCS Becoming an Effective Team Member
  - CCS Conflict Resolution
  - CCS Accountability
  - CCS Professionalism

c. Provide the citation(s) for this policy or procedure.

Job class specifications: <https://www.tn.gov/hr/hr-business-partners/job-class-specifications.html>

**5.4.6 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).**

a. To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

Licensing Consultants maintain average caseloads of between 25 to 35 cases per evaluator. These caseload averages allow Licensing Consultants to conduct sufficient number of annual visits ranging from 4-6 visits per year depending on the child care providers licensure type and star rating. In 2021 the Lead Agency restructured the child care services division. As a result of this effort the classification for Licensing Program Evaluator was changed to Licensing Consultant and the average caseload target was reestablished at 20-25 per consultant.

b. Provide the policy citation and state/territory ratio of licensing inspectors.

The caseload ratios are based upon available staffing, coverage requirements, and goals as determined by management. In the future state of child care, relationships with child care providers will be emphasized and central to program design. While technology can help with transactions, personal interactions will be a central part of the licensing program. Child Care Services led a complete redesign of program structure and staff organization in 2021. There is now a licensing team, that will issue licenses and monitor for compliance, including quality and health/safety factors. The role of this licensing team will expand to provide quality coaching and technical assistance on continuous improvement in collaboration with our Quality Partners.

Based on this structure there are 122 Licensing Consultants who maintain a caseload

of 25 to 30 agencies each.

## 5.5 Comprehensive Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For family child care homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)). Exemptions for relative providers will be addressed in 5.6.5.

A comprehensive background check must include eight (8) separate and specific components (98.43(2)(b)), which encompass three (3) in-state checks, two (2) national checks, and three (3) interstate checks (if the individual resided in another state in the preceding 5 years).

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).**

### a. Components of In-State Background Checks

#### i. Criminal registry or repository using fingerprints in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507



All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

ii. Sex offender registry or repository check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

iii. Child abuse and neglect registry and database check in the current state of residency

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check**

**components, ensuring that these requirements are in place for**

all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services

(e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

## b. Components of National Background Check

### i. FBI Fingerprint Check

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

### ii. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507 is the CBC statute that covers the fingerprinting requirements, but it does not specifically reference NCIC or NSOR. The CBC section of the child care rules: 1240-04-01.07 (1) - This section references requirements for disclosure, registry history, and fingerprinting provided in the T.C.A. and as required by the Child Care and Development Block Grant. The contract that governs the provider's participation in the Child Care Certificate Program includes specifics about the CCDBG criminal background check requirements. There are several different contracts, but the content of the attachment that describes the CCDBG requirements is the same in each.

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

**5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for**

all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

c. Components of Interstate Background Checks

i. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional.

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

ii. Sex offender registry or repository in any other state where the individual has resided in the past 5 years.

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) to mitigate any gaps that may exist between the two sources.

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

iii. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years

Note: This is a name-based search

Licensed, regulated, or registered child care providers

Citation:

T.C.A. §71-3-507

All other providers eligible to deliver CCDF Services

Citation:

Applicable provider contract

### 5.5.2 Procedures for a Provider to Request a Background Check.

Child care providers are required to submit requests for background checks for each of their staff members to the appropriate state or territorial agency, which is to be defined clearly on the state or territory Web site. Family child care home providers must also submit background check requests for all household members over the age of 18. The requests must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years per Â§ 98.43(d)(1) and (2). The state or territory must ensure that its policies and procedures under this section, including the process by which a child care provider or other state or territory may submit a background check request, are published on the web site of the state or territory as described in Â§ 98.43(g) and the web site of local lead agencies.

a. Describe the state/territory procedure(s) for a provider to request the required background checks. If the process is different based on provider type, please include that in this description. If the process is different based on each background check component, please include that in this description.

Each applicant completes a Disclosure Form that is retained by the child care agency. Applicants are then required to register to have their fingerprints scanned at a live scan fingerprinting location. Registration can be done online or via a toll-free number. During the registration process, applicants that are identified as having lived out of state within the last five years are directed to complete the applicable out-of-state forms necessary to

complete all required out of state registry checks.

Instructions for fingerprinting: <https://www.tn.gov/content/dam/tn/human-services/documents/TN-GeneralFingerprintSchedulingInstructions.pdf>

Link to out of state registry check information: <https://www.tn.gov/humanservices/families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0.html>

b. The state/territory must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor. What are the fees and how do you ensure that these fees do not exceed the actual cost of processing and administering the background checks? Lead Agencies can report that no fees are charged if applicable (98.43(f)).

The Lead Agency pays for all fees associated with the background check process.

c. Describe the state/territory policy(ies) related to prospective staff members working on a provisional basis. Pending completion of all background check components in 98.43(b), the prospective staff member must be supervised at all times by an individual who received a qualifying result on a background check described in 98.43(b) within the past 5 years (98.43(c)(4)) and the prospective staff member must have completed and received satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the prospective staff member resides. Describe and include a citation for the Lead Agency's policy:

Applicants are permitted to begin employment on a provisional basis pending completion of all the background check components once the applicant clears the FBI fingerprint check, the TBI state criminal history check, the sex offender registries, the vulnerable persons registry, and the instate child abuse and neglect registry. Provisionally employed applicants must be supervised at all times. The Lead Agency website includes instructions and information about any necessary forms/documentation required by each state for completing the interstate child abuse and neglect registry checks. Interstate checks of the child abuse and neglect registry are processed by the background check unit within the Lead Agency.

A link to CFR requirements that describe the provisions for prospective staff members to work under supervision pending completion of all background check requirements is

maintained on the Lead Agency website: <https://www.tn.gov/content/dam/tn/human-services/documents/CFR%20Section%2098.43%20Criminal%20Background%20Checks.docx>

In addition, the website includes an overview of the fingerprint and background check process that describes the conditional approval process/requirements:

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/fingerprint-and-background-check-process-overview.html>

The conditional approval letter sent to prospective employees who have not completed all the background check requirements includes a prominent watermark of the word "Supervision" and explicitly states that the prospective employee must be supervised by an individual who has received a final approved background check at all times until the prospective employee received a final clearance. Information about the conditional approval process is also covered during the provider orientation session at the beginning of the licensing process.

d. Describe the procedure for providers to request background checks for staff members that resided in another state within the previous 5 years.

During the fingerprint registration process, applicants that are identified as having lived out of state within the last five years are directed to complete the applicable out-of-state forms necessary to complete all required out of state registry checks. Instructions and links to all applicable forms are maintained on a dedicated web page:

<https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-in-tn-.html>

e. Describe the procedure to ensure each staff member completes all components of the background check process at least once during each 5-year period. If your state enrolls child care staff members in the FBI Rap Back Program or a state-based rap back program, please include that in this description. Note: An FBI Rap Back program only covers the FBI Fingerprint component of the background check. If child care staff members are enrolled in a state-based rap back, please indicate which background check components are covered by this service.

The Lead Agency's criminal background check system issues a notification to applicants ninety (90) days before their current background check expires instructing them to register to be fingerprinted again before the expiration date. The notifications at the 90

day interval contribute to the process by alerting the applicant that it is time for them to be fingerprinted again. The fingerprint scan triggers completion of all the other component requirements. A clearance is not issued until all the required components are completed, but the fingerprint scan is what puts all the required checks in motion. Final confirmation that all components have been completed is accomplished by monitoring staff records against the CBC system. The investigations unit also runs system queries to identify individuals that have not initiated the recheck process at the 5 year mark.

f. Describe the procedure to ensure providers who are separated from employment for more than 180 consecutive days receive a full background check.

A criminal background check may be transferred if the employee has been fingerprinted within the last five years **and** the employee has worked for a Tennessee licensed child care agency without a break in employment of more than one hundred and eighty (180) days. If both these conditions apply, the new agency should complete the Criminal Background Check Transfer Form to transfer the educator's background check clearance to the new agency. The background check system includes a start date and termination date field for each staff person. When the investigations unit receives a request to transfer the results of a background check they review the start date/termination date information within the system before transferring the results to confirm that the separation does not exceed 180 days. If the separation exceeds the threshold the individual must undergo a full background check.

g. Provide the website link that contains instructions on how child care providers should initiate background check requests for a prospective employee (98.43(g)).

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees.html>

### **5.5.3 Procedures for a Lead Agency to Respond to and Complete a Background Check.**

Once a request has been initiated, the state shall carry out the request of a child care provider for a criminal background check as expeditiously as possible, but not to exceed 45 days after the date on which such request was submitted. The Lead Agency shall make the determination whether the prospective staff member is eligible for employment in a child care program

(98.43(e)(1)). Lead Agencies must ensure the privacy of background checks by providing the results of the criminal background check to the requestor or identified recipient in a statement that indicates whether a child care staff member (including a prospective child care staff member or a family child care household member over the age of 18) is eligible or ineligible for employment, without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual. In the following questions, describe the Lead Agency's procedures for conducting background checks. These responses should include:

- The name of the agency that conducts the investigation; include multiple names if multiple agencies are involved in different background check components
- How the Lead Agency is informed of the results of each background check component
- Who makes the determinations regarding the staff member's eligibility? Note: Disqualification decisions should align to the response provided in 5.5.7.
- How the Lead Agency ensures that a background check request is carried out as quickly as possible and not more than 45 days after a request is submitted.

a. Describe the procedures for conducting In-State Background Check requests and making a determination of eligibility.

The in-state criminal background check is completed in partnership with the Tennessee Bureau of Investigation (TBI) and a fingerprint vendor (IdentoGo). The applicant reports to the vendor live scan location to be printed. The electronic fingerprint scan is submitted to the TBI who checks the state criminal registry, NSOR, and the FBI database. The TBI forwards the results to the Lead Agency investigation unit. The investigation unit reviews the results to make a determination of eligibility and completes the checks associated with all other applicable in-state registries (SOR, vulnerable person registry, child abuse registry).

b. If the procedure is different for National Background checks, including the name-based NCIC NSOR check and FBI fingerprint check, please describe here.

No. See discription in a. above.

c. Describe the procedures for conducting Interstate Background Check requests and making a determination of eligibility. (Note this response should detail how a state conducts an interstate check for a provider who currently lives in their state or territory but has lived in another state(s) within the previous five years).



During the fingerprint registration process, applicants that are identified as having lived out of state within the last five years are directed to complete the applicable out-of-state forms necessary to complete all required out of state registry checks and submits them to the Lead Agency investigation unit. The investigation unit processes the forms and submits applicable applicant information to a vendor who is contracted to complete the out-of-state criminal registry check. The investigation unit reviews the results of the interstate registry checks to determine eligibility. A secure file is sent to the vendor with the applicant information. Normally, they complete it within 3 to 4 days, but some states require additional release forms which the vendor needs to receive before they can complete the check. We access the vendor portal to find the outcome for each request. For statewide searches, the vendor uses their criminal sourcing guide that shows the source of statewide searches. They run a name-based search for these searches. County searches are conducted at the county court using the PUI (Predominantly Used Index) as defined by the Professional Background Screening Association (PBSA) formerly National Association of Professional Background Screeners. That portion or portions of a county's index at the Central Court which is commonly considered adequate to use exclusively in performing a Common Search.

d. Describe the procedure the Lead Agency has in place to make an eligibility determination in the event not all the components of the background check are completed within the required 45-day timeframe.

The investigation unit runs a monthly report to monitor the status of any outstanding components. If the results of registry checks are not received timely the applicant is cleared after 45 days. Responses from other states vary, after 45 days without getting a response the conditional approval is changed to a full clearance. Some states will not provide the information and so the applicants are cleared after 45 days. If the results, arrive after 45 days the results are noted in the system and appropriate action is taken if necessary to exclude the individual.

e. Describe procedures for conducting a check when the state of residence is different than the state in which the staff member works.

The applicant is processed the same as any other applicant in that the process begins when they complete a fingerprint scan. During the fingerprint scan registration process they are directed to the out of state registry information to complete applicable forms if they lived out of state in the last five years. At this point, different aspects of the check

components happen simultaneously. All the components associated with fingerprint scan (FBI, TBI, NSOR, SOR) are completed by TBI. Investigations are also working to complete the other applicable registries (TN CAN, TN Vulnerable Persons registry). At the same time the applicant is submitting the out of state forms. Once the FBI, TBI, SOR, TN CAN, TN Vulnerable Persons registry is complete the applicant can receive a conditional approval. As soon as the applicant submits the required out of state forms the request(s) are sent to the applicable states and investigations sends the applicable information to the vendor to complete the out of state criminal check.

#### **5.5.4 State designation as a "Compact State" and participation in the National Fingerprint File program.**

a. "Compact States" are states that have ratified the National Crime Prevention and Privacy Compact Act of 1998 in order to facilitate electronic information sharing for noncriminal justice purposes (such as employment) among the Federal Government and states. More information can be found here: <https://www.fbi.gov/services/cjis/compact-council>. The Compact allows signatory states to disseminate its criminal history record information to other states for noncriminal justice purposes in accordance with the laws of the receiving state. For the most up-to-date Compact States and Territories map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory a Compact State?

No

Yes

b. The National Fingerprint File (NFF) is a database of fingerprints, or other unique personal identification information relating to an arrested or charged individual, which is maintained by the FBI to provide positive fingerprint identification of record subjects. Only a state or territory that has ratified the Compact (a Compact State) may join the NFF program. An FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history record repository if the responding state (where the child care staff member has resided within the past 5 years) participates in the NFF program. It is unnecessary to conduct both the FBI fingerprint check and the search of an NFF state's criminal history record repository (refer to CCDF-ACF-PIQ-2017-01). For the most up-to-date NFF Participation map visit: <https://www.fbi.gov/services/cjis/compact-council/maps>. Is your state or territory an NFF State?

No

Yes

### 5.5.5 Procedures for a Lead Agency to Respond to Interstate Background Checks:

#### a. Interstate Criminal History Registry Check Procedures

Provide a description of how the state or territory responds to interstate criminal history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain criminal history information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

The Lead Agency maintains a dedicated website page with information about how to request the criminal history check to facilitate the process for other states. The Tennessee Bureau of Investigation (TBI) is the central repository for criminal history information for the state of Tennessee. TBI allows the general public to obtain a Tennessee adult criminal history on any individual. The process may be completed online or by mail. There are no laws or policies that prevent the state from releasing the results of the criminal history to an out of state entity for the purposes of determining child care employment eligibility. We respond to inquiries by directing the applicant to the information on the dedicated web page where it outlines what they must do to request a criminal history check from TN (which must go through TBI). The link to the dedicated page is: <https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

#### b. Interstate Sex Offender Registry Check Procedures

Provide a description of how the state or territory responds to interstate sex offender history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain sex offender information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

The Lead Agency maintains a dedicated website page with information about how to locate the public facing SOR search option that is maintained on the Tennessee Bureau of Investigation website to facilitate the process for other states. The SOR

maybe searched by name, city, county, zip code, TID Number, and includes a secondary residential search feature. We respond to inquiries by directing the applicant to the information on the dedicated web page where it outlines what they must do to complete a check of the TN SOR. The link to the dedicated page is: <https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

### c. Interstate Child Abuse and Neglect Registry Check Procedures

Provide a description of how the state or territory responds to interstate child abuse and neglect history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain child abuse and neglect information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Lead Agency maintains a dedicated website page with information about how to request a child abuse and neglect registry check to facilitate the process for other states. The Tennessee Department of Children's Services is the repository for this information. Requests are initiated by submitting a specified form to a dedicated email mailbox. There are no laws or policies that prevent the state from releasing the results of the criminal history to an out of state entity for the purposes of determining child care employment eligibility. We respond to inquiries by directing the applicant to the information on the dedicated web page where it outlines what they must do to request a CAN check from the Tennessee Department of Children's Services (the repository for this information in TN). The link to the dedicated page is: <https://www.tn.gov/content/tn/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

## 5.5.6 Consumer Education Website Links to Interstate Background Check Processes

Lead Agencies must have requirements, policies, and procedures in place to respond as expeditiously as possible to other States', Territories' and Tribes' requests for background checks in order to meet the 45-day timeframe (98.43(a)(1)(iii)). In addition, Lead Agencies are required to include on their consumer education website the process by which another Lead Agency may submit a background check request, along with all of the other background check policies and procedures (98.43 (g)).

State and Territory Lead Agencies are required to designate one page of their existing Consumer Education Website as a landing page for all interstate background check related processes and procedures pertaining to their own state. The purpose of having a dedicated interstate background check web page on the Lead Agency Consumer Education Website is to help state and territories implement the interstate background check requirements of the CCDBG Act (CCDF Consumer Education Website and Reports of Serious Injuries and Death (OMB #0970-0473)).

Check to certify that the required elements are included on the Lead Agency's consumer education website for each interstate background check component, and provide the direct URL/website link.

**Note: The links provided below should be a part of your consumer education website identified in 2.3.11.**

### **a. Interstate Criminal Background Check:**

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email

- v. FAX
- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?))
- viii. Forms
- ix. Fees
- x. Is the state a National Fingerprint File (NFF) state?
- xi. Is the state a National Crime Prevention and Privacy Compact State?
- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://www.tn.gov/tbi/divisions/cjis-division/background-checks>

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

b. Interstate Sex Offender Registry (SOR) Check:

- i. Agency Name
- ii. Address
- iii. Phone Number
- iv. Email
- v. FAX
- vi. Website
- vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?))

- viii Forms
- ix. Fees
- Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://www.tn.gov/tbi/general-information/redirect-tennessee-sex-offender-registry-search/sex-offender-registry-search.html>

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

- i. Agency Name
- ii. Is the CAN check conducted through a County Administered Registry or Centralized Registry?
- iii. Address
- iv. Phone Number
- v. Email
- vi. FAX
- vii. Website
- viii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification is needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
- ix. Forms
- x. Fees
- xi. Description of information that may be included in a response to a CAN registry check (including substantiated instances of child abuse and neglect accompanied by the State's definition of "substantiated" instances of child abuse and neglect.

- xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

<https://www.tn.gov/dcs/program-areas/qi/cps-history.html>

<https://www.tn.gov/humanservices/for-families/child-care-services/background-checks-for-child-care-employees/child-care-out-of-state-registry-check0/out-of-state-registry-check--if-you-work-for-a-child-care-outside-of-tn-.html>

**5.5.7 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry (98.43 (c)(1)(i-iii)). Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option) - a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)(iv-v)).**

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

No

Yes.

If yes, describe other disqualifying crimes and provide the citation:

In addition to crimes listed in 98.43 (c)(1), the Lead Agency also disqualifies child care educators for the following crimes: •Aggravated cruelty to animals •Aggravated robbery •Aggravated Arson • Aggravated Burglary •Aggravated Kidnapping •Aggravated rape •Arson •Carjacking •Criminal exposure to HIV •Cruelty to animals •Custodial Interference • Exploitation of a minor by electronic means •Incest •Indecent exposure • Involuntary labor servitude •Kidnapping • Reckless homicide • Robbery • Solicitation of a minor • Stalking •Vehicular Homicide •Weapon offenses



- Additional crimes may be added to this list at the discretion of the Lead Agency.

b. Describe how the Lead Agency notifies the applicant about their eligibility to work in a child care program. This description should detail how the Lead Agency ensures the privacy of background checks. Note: The Lead Agency may not publicly release the results of individual background checks. (98.43(e)(2)(iii)).

The Lead Agency does not release any specific details about any offenses associated with the applicants record. Applicants are issued an "OK to Work" letter if there are no results that prohibit the individual from working in child care. If the results indicate offenses that require the applicant to be excluded from child care the letter only identifies the applicable registry where the excludable offence was discovered.

c. Describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43 (e)(2-4).

Applicants complete a disclosure form to initiate the criminal background check process. The form includes an area for explaining any extenuating circumstances that should be considered in determining whether or not the individual should be allowed to work in a child care agency. The form also includes a detailed statement about the applicant's privacy rights and information about challenging the accuracy or completeness of their criminal history record. The Lead Agency provides for a review process (waiver review committee) that utilizes an advisory group of law enforcement personnel, persons experienced in child protective services, persons experienced in child development issues, and child care providers to consider exemptions from exclusions not prohibited by CCDF requirements based upon extenuating circumstances. After hearing a case the waiver review committee presents its recommendations to the Lead Agency and the Lead Agency has final authority to grant an exemption. Applicants can appeal this decision and request to have a formal hearing before the division of Appeals and Hearings within the Department of Human Services.

### **5.5.8 Appeals Processes for Background Checks**

States and territories shall provide for a process by which a child care program staff member (including a prospective child care staff member) may appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report. The state or territory shall ensure that:

-- The child care staff member is provided with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal

-- A child care staff member will receive clear instructions about how to complete the appeals process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report

-- If the staff member files an appeal, the state or territory will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime

-- The appeals process is completed in a timely manner for any appealing child care staff member

-- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate 1) the state's efforts to verify the accuracy of information challenged by the child care staff member, 2) any additional appeals rights available to the child care staff member, and 3) information on how the individual can correct the federal or state records at issue in the case. (98.43(e)(3))

-- The Lead Agency must work with other agencies that are in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.

a. What is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background check report? If there are different appeal process procedures for each component of the check, please provide that in this description, including information on which state agency is responsible for handling each type of appeal. Note: The FBI Fingerprint Check, State Criminal Fingerprint, and NCIC NSOR checks are usually conducted by a state's Identification Bureau and **may** have different appeal processes than agencies that conduct the state CAN and state SOR checks.

The applicant simply contacts the Lead Agency by phone or email to describe the inaccuracy. Investigations reviews the information in the system to confirm the results. If there is no indication of an error associated with the identifying information for the

individual, it is the responsibility of the applicant to provide court documentation showing that the charge was dismissed or expunged. Applicants are directed to the applicable agencies responsible for the appeals associated with the results of each check. Thereafter, the applicant may submit appropriate documentation that shows the charge information, including the date of the charge and the charge status being dismissed or expunged to the investigation's unit for review. The lead agency updates the status in the background check database if it merited by the supporting documentation presented by the applicant. To avoid exclusion, supporting documentation must be provided within 10 days. If the applicant fails to provide that information by the deadline and the results require exclusion, the applicant will have to be excluded. Tenn. Code Ann. § 71-3-507(e)(4) includes provisions for limited grounds for an appeal. Requests regarding the accuracy of the background check results are normally processed by investigations within two weeks. The formal appeal process through the Division of Appeals and Hearings may take longer since a hearing date must be scheduled.

Applicants may also request an administrative hearing conducted by the Division of Appeals and Hearings pursuant to the Uniform Administrative Procedures Act (Tenn. Code Ann. § 4-5-301 et seq., Tenn. Comp. R. & Regs. 1360-04) to challenge the accuracy of the determination. An appeal can only be requested within ten (10) days of the mailing date of the notification letter. In these cases, an applicant may only show that: A) they are not the person identified in the records used to determine that they should be excluded; OR B) the basis for the exclusion has been dismissed, resulted in an acquittal, or expunged. The applicant may not challenge the underlying facts or the legal basis of the actions that resulted in the reason for the exclusion.

In addition, information about challenging the accuracy or completeness of the FBI criminal history record and information about obtaining a copy of the record is included on the criminal history disclosure form that all applicants complete.

**b. If the appeals process is different for interstate checks, what is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background report for interstate checks?**

The appeal process is the same for interstate registry checks.

**c. Interstate Child Abuse and Neglect (CAN) Registry Check:**

The appeal process is the same for CAN registry checks.

## 5.6 Exemptions for Relative Providers

States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from certain health and safety requirements. Note: This exception applies if the individual cares only for relative children.

Check and describe where applicable the policies that the Lead Agency has regarding exemptions for eligible relative providers for the following health and safety requirements. The description should include the health and safety requirements relatives are exempt from, if applicable, as well as which of the federally defined relatives the exemption applies to.

### **5.6.1 Licensing Requirements (as described in Section 5.1)**

- a. Relative providers are exempt from all licensing requirements.
- b. Relative providers are exempt from a portion of licensing requirements.

Describe:

Relative provider must comply with the requirements applicable to Authorized Professionals

- c. Relative providers must fully comply with all licensing requirements.

### **5.6.2 Health and Safety Standards (as described in Section 5.2 and 5.3)**

- a. Relative providers are exempt from all health and safety standard requirements
- b. Relative providers are exempt from a portion of health and safety standard requirements.

Describe:

Relative provider must comply with the requirements applicable to Authorized Professionals

- c. Relative providers must fully comply with all health and safety standard requirements.

### 5.6.3 Health and Safety Training (as described in Section 5.3)

- a. Relative providers are exempt from all health and safety training requirements.
- b. Relative providers are exempt from a portion of all health and safety training requirements.

Describe:

Relative provider must comply with the requirements applicable to Authorized Professionals

- c. Relative providers must fully comply with all health and safety training requirements.

### 5.6.4 Monitoring and Enforcement (as described in Section 5.4)

- a. Relative providers are exempt from all monitoring and enforcement requirements.
- b. Relative providers are exempt from a portion of monitoring and enforcement requirements.

Describe:

Relative provider must comply with the requirements applicable to Authorized Professionals

- c. Relative providers must fully comply with all monitoring and enforcement requirements.

### 5.6.5 Background Checks (as described in Section 5.5)

- a. Relative providers are exempt from all background check requirements.
- b. Relative providers are exempt from a portion of background check requirements. If checked, identify the background check components that relatives

must complete:

- i. Criminal registry or repository using fingerprints in the current state of residency
- ii. Sex offender registry or repository in the current state of residency
- iii. Child abuse and neglect registry and database check in the current state of residency
- iv. FBI fingerprint check
- v. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name based search.
- vi. Criminal registry or repository in any other state where the individual has resided in the past five years.
- vii. Sex offender registry or repository in any other state where the individual has resided in the past five years.
- viii. Child abuse and neglect registry or data base in any other state where the individual has resided in the past five years.
- c. Relative providers must fully comply with all background check requirements.

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). This section addresses the quality improvement activities implemented by the Lead Agency related to the support of the child care workforce and the development and implementation of early learning and developmental guidelines. It asks Lead Agencies to describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services. (98.53 (f)) in either of these two areas.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a

state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

## 6.1 Professional Development Framework

**6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors in programs that serve children of all ages. This framework should be developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.**

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

i. State/territory professional standards and competencies. Describe:

Tennessee Early Childhood Training Alliance (TECTA), as the early care and education professional development hub for the Lead Agency, utilizes the National Association for the Education of Young Children (NAEYC) Standards for Professional Preparation Programs, which provide a common national framework for all early childhood professional development systems and programs, as the state framework. This builds upon the existing framework established by TECTA and aligns with the Council for Professional Recognition Child Development Associates (CDA) competency areas and NAEYC work with the Council for the Accreditation of Educator Preparation. A core training and competency review team has been established between training delivery partners to begin analysis of current training and alignment with foundational and

advanced knowledge to examine competency alignment with the framework. TECTA will build upon the professional development system in place comprised of eight regional sites and include additional partnering and collaborating agency training. This progression of professional development system includes:

Tennessee Child Care Online Training System (TCCOTS), an online training portal, with capabilities to support adult learning methods of instruction cross-platformed and supported by most common web browsers to provide online work-related training options. Within each module, activities and content quizzes require user demonstration of recognizing and recalling information included in content. The online training modules include specific early childhood area content, aligned with NAEYC national framework, and the expected competencies upon completion. Pre- and post-test scores are incorporated into some modules to measure learning outcomes. Training evaluations are collected for each module with some modules featuring additional questions to collect anticipated implementation of skills learned. Each module is designed to provide a minimum of two hours of training to meet state training hour requirements. TCCOTS is a freely accessible resource for early childhood educators as well as parents. Training certificates are issued to those who provide specific workplace or higher education student information within Tennessee. TCCOTS includes a help desk feature to facilitate user navigation and success. The Tennessee Child Care Professional Training (TN-CCPT) system managed by CCR&R maintains a parallel face-to-face training system that also provides entry level and ongoing free training access to meet CCDF requirements including caregivers, teachers, and directors. The lead agency is exploring technology supports to update the TCOTTTS system and enhance the user experience. The lead agency also developed the Technical Assistance Manager (TAM), a standardized information system used by quality contractors delivering training, coaching, and/or technical assistance. The system supports the collection of additional professional development data such as training records from CCR&R and TECTA as well as technical assistance and targeted technical assistance available to teachers/providers.

TECTA 30-clock hour Orientation training is designed to provide foundational knowledge across roles and settings for care and education professionals. Orientation trainings include such content areas as Administration, Adverse Childhood Experiences, Center-based Care, Family Child Care, Infant-Toddler Care, and School-Age Care, and skills



related to the core competencies of the CDA credential aligned with NAEYC:

- Establishing and maintaining a safe, healthy, learning environment;
- Advancing physical and intellectual competence;
- Supporting social and emotional development and provide positive guidance;
- Establishing positive and productive partnerships with families;
- Ensuring a well-run, purposeful program responsive to participant needs; and
- Maintaining a commitment to professionalism.

TECTA manages the Tennessee Early Childhood Administrator Credential (TECPAC) which uses NAEYC standards:

- Promoting child development and learning;
- Building Family and Community Relationships;
- Observing, Documenting, and Assessing to Support Young Children and Families;
- Using Developmentally Effective Approaches to Connect with Children and Families;
- Using Content Knowledge to Build Meaningful Curriculum; and
- Maintaining a commitment to Professionalism.

These competencies are documented and measured as identified in the Program Administration Scale Measuring Early Childhood Leadership and Management or Business Administration Scale for Family Child Care from the McCormick Tribune Center for Early Childhood Leadership specifically designed for directors. The TECTA management office is responsible for scheduling the TECPAC Academy which serves as the capstone requirement for earning the TECPAC credential. The TECPAC Academy is comprised of content-specific sessions related to early childhood program administration. Candidates receive information and assistance related to individual professional development and program improvement goals and objectives.

TECTA manages the new Infant-Toddler Credential using the aforementioned NAEYC standards. This credential includes NAEYC standards:

- Promoting child development and learning;
- Building Family and Community Relationships;
- Observing, Documenting, and Assessing to Support Young Children and Families;
- Using Developmentally Effective Approaches to Connect with Children and Families;
- Using Content Knowledge to Build Meaningful Curriculum; and
- Maintaining a commitment to Professionalism.

The credential features a combination of formal education and coaching/mentoring provided by the CCR&R Infant-Toddler Quality Coaches with focus on core competencies related to the state QRIS that are documented and measured. A required capstone academy training will be developed for earning the credential.

**ii. Career pathways. Describe:**

The TECTA 30-clock hour Orientation training provides the gateway to accessing academic tuition support and career advancement from Associate degree through graduate degrees, including earning the Tennessee Early Childhood Administrator Credential for administrators and the new Tennessee Infant-Toddler Credential.

The academic pathway for earning the CDA is a key first stepping stone on the career advancement lattice and fully articulates into the Early Childhood Education Associate of Applied Science (AAS) or Associate of Science (AS) degree at 11 two-year Tennessee Board of Regents (TBR) institutions statewide. State credentials also include academic preparation that articulates into academic technical certificates and degrees statewide. The TBR Early Childhood Education AAS programs are accredited by NAEYC/CAEP. Regional articulated pathways toward earning an Early Childhood Education or Child Development Bachelor of Science (BS) degree are in place at some institutions and additional articulation pathways are in development.

**iii. Advisory structure. Describe:**

The TECTA advisory structure is designed by the Tennessee State University Center of Excellence for Learning Sciences and comprised of various academic, state government, professional agency, and community-based stakeholders, some of whom sit on the Tennessee Young Child Wellness Council. Select subcommittees are formed as the TECTA program needs for purposeful strategic planning and implementation of services.

**iv. Articulation. Describe:**

TECTA continues to provide leadership in the development and revision of courses within the Early Childhood Education AAS degree as well as ongoing evaluation and effectiveness of curriculum including textbook adoption for the academic courses used for CDA qualifications. TECTA supports the development and student utilization of articulation agreements across the state through a faculty institute held twice annually

fortwo- and four-year early childhood administrators and faculty. TECTA staff at the two-year academic institutions provide statewide academic advisement for students.

**v. Workforce information. Describe:**

As the early care and education professional development hub for the Lead Agency, the Tennessee Early Childhood Training Alliance (TECTA) has implemented a statewide Training and Workforce Registry supporting early care and education professionals under the direction of the Lead Agency. This registry builds upon existing data systems that include extensive information about the educator workforce in licensed child care facilities who have participated in TECTA professional development training or received academic assistance and supports. The Training and Workforce Registry is designed to support the training and professional development needs of educators, child care agencies and homes, and the Lead Agency and its partners in order to strengthen quality child care services and will become the system of record for all training and professional development for all licensed providers. TECTA has also introduced individualized professional development plans for educators to further empower educators to identify and pursue professional development and continuing education opportunities. To further enhance the application of these individualized professional development plans, the Child Care Resource and Referral Network (CCR&R) will work with child care agencies and homes, the Lead Agency, and other partners to further strengthen quality child care services through the implementation of enhanced quality improvement plans designed to identify potential deficiencies, apply corrective action, or achieve program goals. The Lead Agency will continue to coordinate with the University of Tennessee's College of Social Work Center for Applied Research and Evaluation to design and implement a series of surveys to collect and improve data about workforce characteristics, professional development needs, and other provider-focused topics to ensure the Lead Agency's system of training and technical assistance continues to meet the needs of educators and providers in order to promote high quality child care services.

**vi. Financing. Describe:**

In order to qualify for TECTA financial assistance, a student must meet the following requirements:

- Meet the eligibility requirements for in-state tuition.
- Be currently employed or volunteer on a consistent basis at a state-regulated early care and education program. Applicants must provide proof of employment or consistent

volunteer time when requested by a TECTA site.

- Have completed a TECTA Orientation course, received a TECTA Orientation Certificate via the High School Equivalency Program, or be a declared major in an early childhood education, child development or related degree program, and have earned 3 credits of early childhood coursework with a minimum grade of C.

- Be admitted to a college or university and be enrolled in a required academic course leading to a credential or degree in early childhood education or child development.

- Have completed and submitted the appropriate TECTA application forms and a signed "Release of Academic Information" form permitting the college or university at the end of the semester to release the student's grades to a local TECTA coordinator and TECTA Management.

TECTA provides financial assistance to eligible students enrolled in academic courses leading to CDA preparation and academic credentials or degrees in Early Childhood Education/Child Development. This financial assistance may include full or partial in-state tuition costs. Based on availability of annual grant funds, TECTA Management will determine the percentage of financial assistance to be awarded for CDA preparation, academic credentials, and degrees.

Textbooks for CDA preparation courses may be borrowed from TECTA sites as funding allows. The amount of financial assistance an individual may receive per semester, per funding year, shall be determined by availability of annual grant funds through the guidance of TECTA Management with site participation. Funding consideration may also be given to students enrolled in degree programs in a related field when an early childhood major is not accessible and the student's program of study is designed to meet the early childhood professional career goals of the student. Student tuition is paid directly to the institution of credit through a tuition-only contractual agreement with the TECTA Management and institution in collaboration with the local TECTA site for verification of student eligibility. Students must request financial assistance from the local TECTA contract institution. Students are not eligible to receive financial support from multiple TECTA contract institutions within a given semester.

TECTA also provides scholarships to individuals seeking the CDA credential. The scholarship pays for the application fee and assessment due to the Council for Professional Recognition upon application. TECTA Management identifies stipends or

incentive awards for each student completing the CDA credential, TECPAC, or other identified credential incentives contingent on availability of annual grant funds.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- i. Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

Placement of Tennessee Early Childhood Training Alliance (TECTA) sites within higher education institutions as well as relationships with the Tennessee Board of Regents and Department of Education enable and support strengthened partnerships with professional development organizations to align with college credit-bearing opportunities. The career lattice framework of TECTA allows for implementing comprehensive pathways and multiyear timelines for transitioning to a bachelor's degree and beyond. TECTA coordinating institutions, which may change as local needs and other factors change, currently include: Austin Peay State University, Chattanooga State Community College, Dyersburg State Community College, East Tennessee State University, Roane State Community College, Southwest Tennessee Community College, Tennessee State University, and Tennessee Technological University.

- ii. Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

TECTA hosts its Higher Education Institute twice each year bringing Early Childhood Education/Child Development (ECED) Program Directors and Faculty together from partnering two and four-year institutions of higher learning across the state to promote coursework for ECED credentials, certificate programs, and degrees. Based upon new research, state initiatives and/or new federal guidelines the faculty institute provides for continuing infusions of new best practices and updating course alignments.

- iii. Other

Describe:

**6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.**

It has been the policy that whenever revisions of curricula may be indicated, Tennessee Early Childhood Training Alliance (TECTA) Management will solicit input and suggestions from all TECTA Orientation instructors and coordinators. Focus groups comprised of the TECTA Management Curriculum Coordinator, providers, staff, and consultants will meet to review the proposed revisions and make recommendations if possible. The Curriculum Coordinator will review all suggestions and recommendations and propose any needed revisions to the curriculum. TECTA staff and original authors will review the proposed revisions and generate a final product when possible. All revisions that result from this process must be incorporated into the curriculum used throughout the TECTA Program. Whenever revisions of the TECPAC Academy curricula are needed, the TECPAC Program Manager will coordinate a group following the guidelines in the NAEYC Standards and Guidelines for Professional Development and finalize curricula in collaboration with TECTA Management. TECTA Management responsible for curricula development participate in meetings of the Tennessee Young Child Wellness Council.

**6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).**

Tennessee Early Childhood Training Alliance (TECTA) provides financial assistance to eligible students enrolled in academic courses leading to CDA preparation and academic credentials or degrees in Early Childhood Education/Child Development. The financial assistance may include full or partial in-state tuition costs. Based on availability of annual grant funds, TECTA Management will determine the percentage of financial assistance to be awarded for CDA preparation, academic credentials, and degrees.

TECTA provides scholarships to individuals seeking the CDA credential. The scholarship pays for the application fee and assessment due to the Council for Professional Recognition

upon application. TECTA Management identifies stipends or incentive awards for each student completing the CDA credential, TECPAC, or other identified credential incentives.

As funding is available, TECTA provides financial incentives to individuals who have completed academic preparation in successfully earning a CDA credential.

TECTA provides a Center-based Orientation equivalency certificate to high school students who have successfully completed two classes within the Early Childhood Education Careers Track. This satisfies the high school students' eligibility for obtaining TECTA academic advisement, technical assistance and college tuition assistance in earning certificates and/or degrees. A pilot program was conducted by TECTA in providing a scholarship for the application fee and assessment due to the Council for Professional Recognition upon application for the CDA credential to high school students who successfully completed all four classes within the Early Childhood Education Careers Track. This pilot will be expanded to accommodate additional high school students across Tennessee regions.

The child care rules require all administrative and teaching staff to receive training and consultation the Adverse Childhood Experiences (ACEs). The Lead Agency has partnered with the Department of Mental health to participate in the Zero to Three Infant and Early Childhood Mental Health consultation to support providers in the classroom and outside of the classroom with stress reduction techniques such as mindfulness and health and wellness activities. The Lead Agency implemented the Child Care Wage\$ Tennessee program through Signal Centers to further support the child care workforce by providing biannual salary supplements based upon educational achievements to reduce turnover and encourage educational advancement.

## 6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

### **6.2.1 Describe how the state/territory incorporates into training and professional development opportunities:**

-- the knowledge and application of its early learning and developmental guidelines (where applicable);

-- its health and safety standards (as described in section 5);

-- and social-emotional/behavioral and mental health intervention models for young children, which can include positive behavior intervention and support models that reduce the likelihood of suspension and expulsion of children (as described in Section 2 of the Pre-Print) (98.44(b)).

·This information is incorporated in web-based trainings available through the Tennessee Child Care Online Training System (TCCOTS) and trainings provided by Child Care Resource and Referral (CCR&R). Incorporating these elements begins with the application process to become a child care agency. At the child care center level, individuals or groups that wish to provide care must participate in pre-application and pre-orientation training. New agency staff are required to have an initial orientation and instruction that includes some of these items. Thereafter, trainings offered through TECTA and CCR&R to fulfill annual training requirements would provide instruction on these elements. Several examples of trainings offered through the TCCOTS and CCR&R were outlined in the response to section 6.1.2 and 6.2.1. For example, CCR&R and TECTA both provide training on the Tennessee Early Learning Developmental Standards and trainings that support children's social and



emotional development and they provide detailed instruction on health and safety requirements.

**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)).**

Not Applicable

**6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers in the subsidy system:**

**a) with limited English proficiency**

The Lead Agency continues to ensure translations of licensing documents are available in languages other than English, including Spanish, Somali, and Arabic on the basis of demand.

The pre-licensure unit is working with the individual development districts through the Department of Economic and Community Development to engage potential child care agencies, including non-English speaking communities to encourage capacity building to meet individualized family needs.

**b) who have disabilities**

The Lead Agency seeks guidance from its Division of Rehabilitation Services on recruitment efforts for persons with disabilities.

The pre-licensure unit is working with the individual development districts through the Department of Economic and Community Development to engage potential child care agencies, including those who engage or provide services to individuals with disabilities to encourage capacity building to meet individualized family needs.

**6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians as defined in Section 4 of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians (98.44(b)(2)(iv)).**

Training is available through the Tennessee Child Care Online Training System and Child Care Resource and Referral includes provisions for addressing these areas. Provisions for providing training and resources for specialized services that target focal impact areas such as homelessness, health and safety and limited English proficiency or other specializations.

Training content is developed based upon best practice and recognized standards. Beginning in the Fall of 2021 external/non-agency-based training sources must be approved through TrainTN. Potential trainers submit an application/resume/qualifications/abstract of training content to TrainTn as part of the training approval process. Approved trainings are then grouped by core content areas. Link to TrainTN: <https://traintn.sworpswebapp.sworps.utk.edu/apply/#our-standards>

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

a. Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The Lead Agency provides training for Child Care Resource and Referral (CCR&R) on serving children and families experiencing homelessness. CCR&R provides statewide training to child care agencies on identifying and providing resources for children

experiencing homelessness statewide. The Lead Agency and CCR&R Family Engagement Quality Coaches provide outreach services to families experiencing homelessness by implementing strategies to increase networks to families experiencing homelessness and support effective cross-sector collaboration.

b. Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.3.6).

The Lead Agency provides ongoing training to its Child Care Services staff on identifying and serving homeless children and families. CCR&R provides training to child care agencies on identifying and serving homeless children and their families to child care agencies.

**6.2.6 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.**

a. Describe the strategies that the state/territory is developing and implementing for strengthening child care providers' business practices.

Each Tennessee Early Childhood Program Administrator Credential Academy consists often (10) two-hour sessions of instruction. The sessions are comprised of direct instruction, interactive assignments, and participation in online discussion boards. See Tennessee Early Childhood Program Administrator Credential mentioned above in 6.1. Child Care Resource and Referral also works closely with providers through the development of continuous Quality Improvement Plans that will target specific areas to strengthen a provider's level of quality, business practices, accessibility and availability impact to supply, and the general improvement of child care services. CCR&R also conducts Small Business Academies that promote best practices and strengthen business operations for child care agencies. The focus of the academies include: Budgets, Projections, and Planning; Financial Reports and Internal Controls; Marketing for Child Care Programs; and Staff Recruitment and Retention for Center-based Child Care Programs.

b. Check the topics addressed in the state/territory's strategies for strengthening child care providers' business practices. Check all that apply.

- i. Fiscal management
- ii. Budgeting
- iii. Recordkeeping
- iv. Hiring, developing, and retaining qualified staff
- v. Risk management
- vi. Community relationships
- vii. Marketing and public relations
- viii. Parent-provider communications, including who delivers the training, education, and/or technical assistance
- ix. Other

Describe:

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

Lead Agencies can invest CCDF quality funds in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 of the CCDF Rule, and those included in the activities to improve the quality of child care also addressed in Section 7 (98.53(a)(1)).

#### 6.3.1 Training and professional development of the child care workforce.

a. In the table below, describe which content is included in training and professional development activities and how an entity is funded to address this topic. Then identify which types of providers are included in these activities. Check all that apply.

- i. Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies (98.53 (a)(1)(i)(A)).

**Describe the content and funding:**

Child Care Resource and Referral (CCR&R) and the Tennessee Early Childhood Training Alliance (TECTA) provide training, technical assistance, coaching and mentoring to providers on a number of early care and education topics through a quality contract with the Lead Agency such as: Abusive Head Trauma Adverse Childhood Experiences (ACEs) Assessing Children's Learning: How Children Learn and Develop Basic Skills for Brain Smart Classroom Management Brain Development Childhood Obesity Conscious Discipline Defining the Curriculum for Infants and Toddlers Developmental Standards: The Building Blocks for Stronger Families Food Portions (by age groups) Inclusion Race and Culture in Early Childhood Settings Tennessee Early Intervention System Transforming Aggression into Healthy Expressions of Emotions.

**Which type of providers are included in these training and professional development activities?**

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ii. Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and the mental health of young children and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.4.5.) (98.53(a)(1)(iii)).

**Describe the content and funding:**

The Lead Agency has adopted a suspension and expulsion policy that promotes positive social-emotional development and provides strategies and resources to reduce challenging behaviors and support for early childhood mental health for educators and families. Through a quality contract with the Lead Agency CCR&R and TECTA provide training, technical assistance, coaching and peer mentoring to providers on classroom guidance, Adverse Childhood Experiences (ACEs) 30-hour training series, and the Pyramid model .

AIMHiTN delivers education, training, and resources to assist caregivers, educators, healthcare providers, and other professionals in their everyday interactions with infants, young children, and their families.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iii. Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. (98.53(a)(1)(iv)).

Describe the content and funding:

CCR&R and TECTA provide training, technical assistance, coaching and mentoring to providers on a number of early care and education topics through a quality contract with the Lead Agency.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

iv. Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula, and designing learning environments that are aligned with state/territory early learning and developmental standards (98.15 (a)(9)).

Describe the content and funding:

The Lead Agency provides training on the Tennessee Early Learning

Developmental Standards (TN-ELDS) through a quality contract with CCR&R and TECTA. The training provides an introduction to and exploration of the Tennessee early learning developmental standards for early care and educators. TN-ELDS provides early care and educators with developmentally appropriate and culturally and linguistically responsive instructions focusing on a framework of developmental milestones for all children inclusive of diverse cultures and languages.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

v. Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development.

Describe the content and funding:

2 Generation Strategy The Overarching Strategy for Creating Cycles of Success for Tennessee Families The Tennessee Department of Human Services has adopted a service delivery model that is consistent with the 2 Generation Approach as an organization. Our goal is to develop a foundational framework for the Department, where all programs are aligned- ensuring 2 Generation tactics are applied when working with all customers in all aspects of case management and service delivery. 2 Generation approaches can be found along a continuum. Whole-family approaches focus equally and intentionally on services and opportunities for the parent and the child. Child-parent approaches focus first or primarily on the child but are moving toward a 2 Generation approach and also include services and opportunities for the parent. Parent-child approaches focus first or primarily on the parent but are moving toward a two-generation approach and also include services and opportunities for children. This includes innovative state programs and initiatives as the Lead Agency's partnership with the Governor's Early Literacy Foundation (GELF) and Dolly Parton's Imagination Library, and increasing access to quality care through the Child Care Certificate Program Smart Steps initiative.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vi. Using data to guide program evaluation to ensure continuous improvement 98.53(a)(1)(ii).

Describe the content and funding:

TECTA uses pre and post assessment for all TECTA Orientation classes. This data is collected and evaluated for course and instructor evaluation as well as learning of participants involved. Each class also collects reflective journals from participants that are used to identify those who need or request additional TA. The Program Administration Scale PAS and Business Administration Scale BAS is used to measure administrative and business practices as part of the TECPAC Academy required for earning the Program Administrator Credential. Pre Academy scores are used in setting goals when earning the credential and then scored again upon completion of the Academy. Renewals consider additional goals and maintaining quality practices. Accreditation self-study and outcomes related to the programs achieving Accredited status is also measured. Additionally, TECTA examines the number of students and classes supported for students who receive academic tuition assistance and other supports. The academically based training pathway for earning the CDA demonstrates an overall student success rate of nearly 100% in earning the CDA credential. Students who receive tuition assistance and academic support success rate for successful completion of academic courses consistently averages 84%. The Lead Agency supports these activities through a quality contract with TECTA.

Which type of providers are included in these training and professional development activities?



- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

vii. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.

Describe the content and funding:

2 Generation Strategy- The Overarching Strategy for Creating Cycles of Success for Tennessee Families The Tennessee Department of Human Services has adopted a service delivery model that is consistent with the 2 Generation Approach as an organization. Our goal is to develop a foundational framework for the Department, where all programs are aligned- ensuring 2 Generation tactics are applied when working with all customers in all aspects of case management and service delivery. 2 Generation approaches can be found along a continuum. Whole-family approaches focus equally and intentionally on services and opportunities for the parent and the child. Child-parent approaches focus first or primarily on the child but are moving toward a 2 Generation approach and also include services and opportunities for the parent. Parent-child approaches focus first or primarily on the parent but are moving toward a two-generation approach and also include services and opportunities for children. This includes innovative state programs and initiatives such as the Lead Agency's partnership with the Governor's Early Literacy Foundation (GELF) and Dolly Parton's Imagination Library, and increasing access to quality care through the Child Care Certificate Program Smart Steps initiative. We have also targeted specific support to parents and providers in "distressed" counties, including a 15% differential added to the base child care subsidy rate and a higher amount (\$5,000) available through our enhancement grant program.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based

- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

viii. Caring for and supporting the development of children with disabilities and developmental delays 98.53 (a)(1)(i)(B).

Describe the content and funding:

Through a contract with the Lead Agency, Signal Centers, Inc. as described in section 1.7 fulfills a scope of services which improves the overall quality of child care, strengthens the training and technical assistance system for the state, and assures quality and consistent practices among the CCR&R Network.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

ix. Supporting the positive development of school-age children (98.53(a)(1)(iii)).

Describe the content and funding:

The Lead Agency collaborates with TDOE and other partners on the School-Age Early Learning Developmental Standards. CCR&R and TECTA provide training, technical assistance, coaching and mentoring to providers to support the positive development of school-age children through a quality contract with the Lead Agency.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home

- License- exempt family child care home
- In-home care (care in the child's own home)

x. Other

Describe:

NA

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

**b. Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce and then identify which providers are eligible for this activity. Check all that apply.**

- i. Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)
- ii. Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- iii. Financial awards such as scholarships, grants, loans, or reimbursement for expenses and/or training, from the state/territory to complete post-secondary education.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)
- iv. Other.
  - Licensed center-based
  - License exempt center-based
  - Licensed family child care home
  - License- exempt family child care home
  - In-home care (care in the child's own home)

Describe:

In order to qualify for financial assistance through the TECTA, a student must meet the following requirements: Meet the eligibility requirements for in-state tuition. Be currently employed or volunteer on a consistent basis at a state-regulated early care and education program. Applicants must provide proof of employment or consistent volunteer time when requested by a TECTA site. Have completed a TECTA Orientation course, received a TECTA Orientation Certificate via the High School Equivalency Program, or be a declared major in an early childhood education, child development or related degree program and have earned three credits of early childhood coursework with a minimum grade of C. Be admitted to a college or university and be enrolled in a required academic course leading to a credential or degree in early childhood education or child development. Have completed and submitted the appropriate TECTA application forms and a signed "Release of Academic Information" form permitting the college or university at the end of the semester to release the student's grades to a local TECTA site coordinator and to TECTA Management. TECTA provides financial assistance to

eligible students enrolled in academic courses leading to CDA preparation and academic credentials or degrees in Early Childhood Education/Child Development. The financial assistance may include full or partial in-state tuition costs. Based on availability of annual grant funds, the TECTA Management Office will determine the percentage of financial assistance to be awarded for CDA preparation, academic credentials, and degrees. Textbooks for CDA preparation courses may be borrowed from TECTA sites. The amount of financial assistance an individual may receive per semester, per funding year, shall be determined by availability of contract funds through the guidance of TECTA Management with TECTA site participation. Funding consideration may also be given to students enrolled in degree programs in a related field when an early childhood major is not accessible and the student's program of study is designed to meet the early childhood professional career goals of the student. Student tuition is paid directly to the institution of credit through tuition only contractual agreement with the TECTA Management Office and institution in collaboration with the TECTA site for verification of student eligibility. Students must request financial assistance from the TECTA site contract institution. Students are not eligible to receive financial support from multiple TECTA contract institutions within a given semester.

**6.3.2 Describe the measurable indicators of progress relevant to subsection 6.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Lead Agency is continually evaluating indicators and measurements relevant to these activities which may include but are not limited to: Scoring components of QRIS; Professional development delivered to early care and educators; Child care agency participation in the Gold Sneaker initiative; Delivered trainings, technical assistance, targeted technical assistance, coaching, and mentoring.

## 6.4 Early Learning and Developmental Guidelines

**6.4.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.**

a. Describe how the state/territory's early learning and developmental guidelines address the following requirements:

i. Are research-based.

The Tennessee Early Childhood Education Early Learning Developmental Standards, or TN-ELDS, were developed using a variety of research and evidence-based references including Birth to Three, American Academy of Pediatrics Child Health Developmental Milestones, Centers for Disease Control and Prevention, and peer reviewed publications and articles. The TN ELDS were developed to provide examples of a developmental framework for developmental observation and guidance for those working with young children.

ii. Developmentally appropriate.

The TN-ELDS are designed to promote culturally and developmentally appropriate, research-based best practice utilizing the fundamental philosophy, cognitive, emotional, and social capacities are inextricably intertwined especially in early childhood and continue throughout life.

iii. [Culturally and linguistically appropriate.](#)

The original design and each revision considered research based peer reviewed references from the Center on the Developing Child, Harvard University, National Association for the Education of Young Children, Division of Early Childhood, American Academy of Pediatrics, and others.

iv. [Aligned with kindergarten entry.](#)

The most recent revision of the standards examined the major vision of the TN ELDS for four year-olds for alignment with the kindergarten standards. The standards were reviewed in 2017, accepted in 2018 and the online version of the training was edited in 2019.

v. [Appropriate for all children from birth to kindergarten entry.](#)

The Early Learning Developmental Standards (ELDS) are intended for all children regardless of economic, linguistic, and cultural differences and/or physical, learning, or emotional challenges. Individualized, appropriate, and reasonable supports and accommodations must be provided to close the achievement gap and promote school readiness for all children.

vi. [Implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.](#)

The Lead Agency collaborates with the Tennessee Department of Education and with other early care and education partners in the development of the early learning and developmental guidelines that are adopted by the Tennessee State Board of Education.

b. [Describe how the required domains are included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.](#)

i. [Cognition, including language arts and mathematics.](#)

In this section of the TN-ELDS Receptive and Expressive Language creates the foundation for the additional milestones included in the section. Additional skills include speech and reading foundational skills as well as writing behaviors and skills , language arts is introduced in the four year-old standards as pretext for school readiness toward Kindergarten. Math and Science are included in the cognitive

development emphasizing the importance of observations and manipulation of concrete materials and real experiences as young children explore their environment and make meaning of hands on activities.

#### ii. Social development.

This is the second section of the TN-ELDS. This section includes Self-awareness, Self-Regulation, Cooperation skills young children develop. For the older child and intro to kindergarten this becomes foundational milestones for understanding social studies and a larger world view.

#### iii. Emotional development.

Social and Emotional development are intertwined and included in Approaches to Learning for the youngest children and blend into various milestones for the four-year old child in developing peer relationships.

#### iv. Physical development.

Physical development is addressed with large and small motor milestones and achievement standards. This section provides a wide range of skills and abilities as well as preferences for some children with differing abilities.

#### v. Approaches toward learning.

This is the first section of the TNELDS and provides an overview that Young children require support from a caregiver to feel comfortable in exploring their environment. Not all children approach learning in the same way. Children have different temperaments that impact learning and those children with special needs or whose home language is not English may need additional support from an adult or from adaptive equipment in order to explore their environment. Regardless of a child's learning style, a responsive adult can support children's interactions to encourage every child approach learning with excitement and anticipation.

#### vi. Describe how other optional domains are included, if any:

NA

#### c. Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates.



The Tennessee Early Learning and Developmental Standards (TN ELDS) for children birth to 48 months were last revised October 2013.

In 2017 the Tennessee Early Learning and Developmental Standards (TN ELDS) for four year olds were reviewed to align with school readiness and match developmental flow toward K-12 structure and language. The standards were accepted in 2018 and the online version of the training was edited in 2019.

d. If applicable, discuss the state process for the adoption, implementation, and continued improvement of state out-of-school time standards.

The Tennessee Afterschool Network (TAN) has completed a final draft of the developmental standards as well as developed school-age program standards in an effort to encourage and promote high quality out-of-school time for children. Many programs have begun to reference these draft standards, however they have not been formally accepted. TECTA staff have been involved with the drafts of both documents and hopes to collaborate with the TAN in achieving recognition and formal acceptance as the lead agency works toward a transformation of the QRIS system and Quality measures. The draft of the standards is available at: [http://www.tnafterschool.org/wp-content/uploads/QUALITY-STANDARDS-DRAFT\\_7-18-1.pdf](http://www.tnafterschool.org/wp-content/uploads/QUALITY-STANDARDS-DRAFT_7-18-1.pdf)

e. Provide the Web link to the state/territory's early learning and developmental guidelines and if available, the school-age guidelines.

<https://www.tn.gov/education/instruction/academic-standards/early-learning-development-standards.html>

#### **6.4.2 CCDF funds cannot be used to develop or implement an assessment for children that:**

-- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

-- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,

- Will be used as the primary or sole method for assessing program effectiveness,
- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

Tennessee embeds the early learning and developmental guidelines in a variety of approaches in the preparation of and ongoing professional development for the child care workforce and in classroom practice. Child Care Resource and Referral and the Tennessee Early Childhood Training Alliance train providers so the early learning guidelines content is included in higher education coursework, technical assistance services to early care and education practitioners, classroom instruction and supports the improvement of program quality.

**6.4.3 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measurable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).**

The Lead Agency's measurable indicators may include, but are not limited to: The number of high-quality child care agencies; Complaints validated; Legal enforcements; Delivery of technical assistance, targeted technical assistance, coaching, and peer mentoring; and Violations.

## 7 Support Continuous Quality Improvement

Lead Agencies are required to use a portion of their CCDF program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the CCDF Plan, the ACF 118, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. In the annual expenditure report, the ACF-696, ACF will collect data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a Quality Progress Report, the ACF 218, that will include a description of activities funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce (Addressed in Section 6)
- Improving on the development or implementation of early learning and developmental guidelines (Addressed in Section 6)
- Developing, implementing, or enhancing a tiered quality rating and improvement system or other systems of quality improvement for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring,

training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds, and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations, and all categories of care. It is important that while Lead Agencies have the flexibility to define "high quality" and develop strategies and standards to support their definition, Lead Agencies should consider how that definition and those strategies for different provider types reflect and acknowledge their unique differences and how quality varies in different settings, including family child care and small care settings as well as child care centers.

This section covers the quality activities needs assessment, quality improvement activities, and indicators of progress for each of the activities undertaken in the state or territory.

## 7.1 Quality Activities Needs Assessment for Child Care Services

**7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).**

The Lead Agency conducts its assessment of need utilizing methodologies that include annual and periodic analyses by the institutions of higher education, research studies that focus on the impact of the Quality Rating Improvement System (QRIS), market rate and supply and demand studies, public focus groups and information sessions with partners, consumers, and providers of child care services, and review of contracts and services.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions and includes the following necessary elements to gain an overall picture of program quality:

- A streamlined system that will support ongoing data collection in all licensed programs to gain a more accurate picture of program quality
- Early Childhood Education program quality defined by the strongest predictors of child outcomes.
- Programs receive targeted, relationship-based quality improvement coaching and are connected to the resources necessary to raise quality.
- Financial supports invested using deliberate strategies to support quality improvement.
- Families can find child care that is the best fit for their family through a clear, simple process.

**7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. If applicable, include a direct URL/website link for any available evaluation or research related to the findings.**

In January 2019, the Lead Agency convened approximately 300 stakeholders to discuss the Child Care Certificate Program and subsidy rates. Initial increases to subsidy rates followed in April and July.

In February 2019, a town hall meeting was conducted to discuss strengths and opportunities within the current quality assessment and rating program and a survey was also issued to child care providers and partners about their interest in small business training.

We engaged a national consultant to develop high-level recommendations for redesign of Tennessee's QRIS. The consultant project included an analysis of quality assessment systems used by other states and a literature review of best practices. The consultant also conducted regional focus groups to engage child care providers, community partners, and TDHS staff to further identify and discuss key components of a redesigned system. After receiving the recommendations from the consultant group, the Lead agency held focus groups with Lead Agency Staff, community based events statewide to collect information/comment about the current process. and partners were included in focus groups to give specific feedback about the big ideas for redesign of the QRIS. Through those conversations, the Lead Agency recognized a general desire for redesign of the current system. When it launched in 2001, Tennessee's Star Quality Program was one of the first child care quality rating programs in the country. Over the years, this program has significantly helped to raise awareness about the importance of quality child care and has assisted many agencies in improving their programming. At this point, stakeholders generally agree that it is time for Tennessee to be a leader in innovation again. The purpose of the sessions was to address frequently asked questions pertaining to expectations for the annual assessment. Myths were eradicated and clarity was also provided concerning the Tennessee Additional Notes. Providers were also given an opportunity to give feedback and comments on ways to improve or revise the assessment process.

During the reporting period the Lead Agency has been developing the tools necessary to support a redesigned QRIS system. The new QRIS will be weighted towards teacher-child interactions and will evaluate this element along with designated health and safety practices during multiple visits each year. In February 2020, Lead Agency child care staff traveled to a peer state to review their recently redesigned QRIS and to compare ideas and lessons learned.

The Lead Agency has completed legislation necessary to transition to the new QRIS and has engaged providers and partners in committees to revise the current child care rules to support these changes to the system.

In preparation for transitioning to the new QRIS, the Lead Agency reorganized staff in the Division of Child Care Services to support the new system and to improve the delivery of services within the broader frame-work of the state’s early child care education structure.

In response to the circumstances of the pandemic the Lead Agency began using an interim assessment tool in combination with the other report card components to conduct evaluations/measure effective practice in July 2020. The interim tool was developed in partnership with CCR&R. The interim tool will be used until the new QRIS redesign is fully implemented.

## 7.2 Use of Quality Funds

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

a. Supporting the training and professional development of the child care workforce as discussed in 6.2 (Related Section: 6.3). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

b. Developing, maintaining, or implementing early learning and developmental guidelines (Related Section: 6.4). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

c. Developing, implementing, or enhancing a tiered quality rating and improvement system (Related Section: 7.3). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

d. Improving the supply and quality of child care services for infants and toddlers (Related Section: 7.4). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

e. Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7 (Related Section: 7.5). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

f. Facilitating Compliance with State Standards (Related Section: 7.6). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

g. Evaluating and assessing the quality and effectiveness of child care services within the state/territory (Related Section: 7.7). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

h. Accreditation Support (Related Section: 7.8). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:



- i. Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development (Related Section: 7.9). Check all that apply.

i CCDF funds

ii. State general funds

Other funds. Describe:

- j. Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible (Related Section: 7.10). Check all that apply

i CCDF funds

ii. State general funds

Other funds. Describe:

The Lead Agency established enhancement grants for qualifying TDHS Licensed Child Care agencies that specifically support either quality improvement, promote compliance with licensure rules, or increase capacity. Agencies may apply for up to \$4,000 (or \$5,000 for distressed counties) to support these enhancements.

### 7.3 Quality Rating and Improvement System (QRIS) or Another System of Quality Improvement

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring

## 5. Outreach and consumer education

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

- a. No, the state/territory has no plans for QRIS development. If no, skip to 7.4.1.
- b. No, but the state/territory is in the QRIS development phase. If no, skip to 7.4.1.
- c. Yes, the state/territory has a QRIS operating statewide or territory-wide.

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners, and provide a link, if available.

The Lead Agency administers the Quality Rating Improvement System (QRIS) in Tennessee. Until March of 2020 the QRIS was based upon annual assessments utilizing Environment Rating Scales (ERS™) tools that were conducted by the Child Care Assessment staff. More detailed information about the QRIS is included at: <https://www.tn.gov/humanservices/for-families/child-care-services/child-care-report-card-star-quality-program.html> <https://starquality.sworpswebapp.sworps.utk.edu/>

In response to the circumstances of the pandemic the Lead Agency began using an interim assessment tool in combination with the other report card components to conduct evaluations/measure effective practice in July 2020. The interim tool was developed in partnership with CCR&R. The interim tool will be used until the new QRIS redesign is fully implemented.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions.

- d. Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

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

Describe the other system of quality improvement and provide a link, if available.

### 7.3.2 Indicate how providers participate in the state or territory QRIS or another system of quality improvement.

a. Are providers required to participate in the QRIS or another system of quality improvement? Check all that apply if response differs for different categories of care.

Participation is voluntary

Participation is partially mandatory. For example, participation is mandatory for providers serving children receiving a subsidy, participation is mandatory for all licensed providers or participation is mandatory for programs serving children birth to age 5 receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).

The QRIS system in Tennessee includes both mandatory and voluntary aspects. After the first year of operation, all licensed child care providers are evaluated annually as part of the QRIS system and must post a report card detailing the evaluation results within their facility. Providers earning a 1, 2, or 3 Star Rating may elect to participate in the Star Quality program. Providers in the Star Quality program that participate in the Child Care Certificate Program are eligible for bonus payments based upon the Star Rating earned.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions.

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 QRIS or another system of quality improvement?  
Check all that apply.

- i. Licensed child care centers
- ii. Licensed family child care homes
- iii. License-exempt providers
- iv. Early Head Start programs
- v. Head Start programs
- vi. State Prekindergarten or preschool programs
- vii. Local district-supported Prekindergarten programs
- viii. Programs serving infants and toddlers
- ix. Programs serving school-age children
- x. Faith-based settings
- xi. Tribally operated programs
- xii. Other

Describe:

Licensed Group Homes and Selected Department of Education approved sites.

c. Describe how the Lead Agency's QRIS, or other system for improving quality, considers how quality may look different in the different types of provider settings which participate in the QRIS or other system of quality improvement. For instance, does the system of quality improvement consider what quality looks like in a family child care home with mixed-age groups vs. child care centers with separate age groups? Or are standards related to quality environments flexible enough to define quality in home-based environments, as well as child care center environments?

The Quality Rating Improvement System (QRIS) in place until March 2020 included provisions for highly trained professionals to conduct classroom observations and provider assessments objectively and without bias utilizing ERS™ tools that are designed for the specific child care setting.

In response to the circumstances of the pandemic the Lead Agency began using an interim assessment tool in combination with the other report card components to conduct evaluations/measure effective practice in July 2020. The interim tool was developed in partnership with CCR&R. The interim tool will be used until the new QRIS redesign is fully implemented.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions and is designed to be flexible enough for use in both home and center-based environments. The interim tool and the new framework are designed to recognize differences in each specific child care setting.

### 7.3.3 Identify how the state or territory supports and assesses the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services or another system of quality improvement. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33).

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - a. Programs that meet state/territory PreK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between PreK programs and the quality improvement system) .
  - b. Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
  - c. Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
  - d. Programs that meet all or part of state/territory school-age quality standards.

e. Other.

Describe:

Accreditation is part of the temporary quality assessment instrument that will remain in effect until 2022 and will be a component of the new QRIS moving forward.

### 7.3.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

No

Yes. If yes, check any links between the state/territory's quality standards and licensing requirements

a. Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.

b. Embeds licensing into the QRIS

c. State/territory license is a "rated" license

d. Other.

Describe:

NA

### 7.3.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS or another system of quality improvement.

No

Yes. If yes, check all that apply

a. If yes, indicate in the table below which categories of care receive this support.

i. One-time grants, awards, or bonuses

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

ii. Ongoing or periodic quality stipends

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

iii. Higher subsidy payments

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

iv. Training or technical assistance related to QRIS

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

v. Coaching/mentoring

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

vi. Scholarships, bonuses, or increased compensation for degrees/certificates

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

vii. Materials and supplies

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

viii. Priority access for other grants or programs

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

ix. Tax credits for providers

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

x. Tax credits for parents

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

xi. Payment of fees (e.g. licensing, accreditation)



- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home (care in the child's own home)

b. Other:

NA

**7.3.6 Describe the measurable indicators of progress relevant to subsection 7.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

Since the last Plan cycle, the Lead Agency significantly increased investments in technical assistance, training, and professional development supports for providers and has developed a workforce registry to serve as the system of record for all training and professional development moving forward.

The new QRIS that will launch in early 2022 will focus on the components and structure below: Strongest Indicators of Successful Child Outcomes

Two Sections of Elements and Indicators:

Health & Safety

Teacher Child Interactions

Quarterly Evaluations with Immediate Feedback to Provider on areas needing Improvement

Annual Score based on Overall Average

Violations Captures through Unmet Elements/Indicators

The Lead Agency will use data from the new QRIS to evaluate progress on improving the quality of child care. Component scores and overall scores will serve as a measure of progress by which improvement can be evaluated over time.

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

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

### **7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- a. Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low- income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

The Lead Agency supports seven CCR&R resource offices to serve the workforce regions statewide.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home

- In-home care (care in the child's own home)
- b. Establishing or expanding the operation of community-based, neighborhood-based, or provider networks comprised of home-based providers, or small centers focused on expanding the supply of infant and toddler care.

Describe:

The TFCCN under TECTA offers Family child care providers across the state additional opportunities to participate in family child care specifically designed services that include linages with the Tennessee Family Child Care Alliance, Regional and local family child care support groups in order to strengthen the commitment to high quality care, children, and families. The TECTA provides overall support for professional development, business practices, family engagement, child care advocacy, and technical assistance. The TECTA with the TFCCN under the guidance of the Lead Agency will target growth of family home providers in child care deserts by promoting entrepreneurship and small business ownership opportunities.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- c. Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

Lead Agency partners with the Child Care Resource and Referral (CCR&R) agencies to provide training, technical assistance, and coaching to child care agencies and professionals who care for infants and toddlers to increase the quality of care for this age group. Infant/Toddler professionals are required to attend Tennessee Child Care Professional Training (TN-CCPT) trainings and increase their knowledge through technical assistance, targeted technical assistance, and TN-CCPT trainings. The Lead Agency has significantly increased the number of Infant-Toddler Quality Coaches (15) available through Child Care Resource & Referral (CCR&R) Network. Infant-Toddler Quality Coaches provide intense technical assistance and coaching for infant and toddler educators. Tennessee Early Childhood Training Alliance (TECTA) is providing additional coursework, financial assistance, and professional development enhancing

support for infant/toddler teachers, including the introduction of the Tennessee Infant-Toddler Credential. The CCR&R Infant-Toddler Quality Coaches will collaborate with TECTA to convene local peer learning groups for infant and toddler educators across the state and assist TECTA through its partnership with the Tennessee Family Child Care Alliance with further strengthening the quality of infant-toddler care in family and group child care settings. AIMHiTN supports CCDF partners as well as Tennessee's early care and early education workforce in expanding overall competency in infant and early childhood mental health (IECMH) and embedding IECMH principles into the daily practice of all professionals in an effort to enhance overall quality in child care programs, with a particular focus on infant/toddler quality of care.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- d. Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant/toddler specialists.

Describe:

Lead Agency partners with the Child Care Resource and Referral (CCR&R) agencies to provide training, technical assistance, and coaching to child care agencies and professionals who care for infants and toddlers to increase the quality of care for this age group. Infant/Toddler professionals are required to attend Tennessee Child Care Professional Training (TN-CCPT) trainings and increase their knowledge through technical assistance, targeted technical assistance, and TN-CCPT trainings.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

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

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

### **7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- e. Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

The Lead Agency meets with representatives from the agency responsible for IDEA(Department of Education) on a regular basis. These meetings provide a platform for coordination, brainstorming, and assessment of current and new services needed to support children's early learning and development and the implementation of the 2Generation approaches to family supports.

- Licensed center-based  
 License exempt center-based  
 Licensed family child care home  
 License- exempt family child care home

In-home care (care in the child's own home)

f. Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments.

Describe:

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01 require the following: For infants/toddlers, a portion of the day shall include floor time for activities that develop physical, social, language and cognitive skills. Each caregiver shall be responsible for providing consistent care for a specific infant(s)/toddler(s). "Consistent care" includes, but is not limited to: planning and record-keeping for the child, communication, general interaction with and routine care of the child. In infant/toddler rooms, equipment and space shall be provided for climbing, crawling, and pulling without the restraint of playpens or cribs. Toys, educational materials, and play materials shall be organized and displayed within children's reach so that they can select and return items independently. Toys and teaching aids that are small or that have small parts that can be inhaled or swallowed shall be inaccessible to infants and toddlers. Because of the importance of language development and communication skills infants and toddlers shall have language experiences with adults on a daily basis. The licensing regulations requires the management of the agency shall maintain a system that enables all children in the agency's care to receive a level of supervision of their status and activities that is appropriate to their age and their developmental, physical and mental status to ensure children's health and safety. For children six week of age through nine years of age, an adult must be able to hear the child at all times, must be able to see the child with a quick glance, and must be able to physically respond immediately. When infants are cared for in a center with older children, they shall not be grouped with children older than thirty (30) months of age, and a separate area shall be provided for them. Infant and toddler groups may never exceed the required ratios and group sizes; for a single grouping of 8 infants ages weeks to 15 months, the ratio should be 1:4 (one adult per 4 infants/toddlers). For a single grouping of 10 infant/toddlers ages 6 weeks to 30 months, the ratio should be 1:5. Staff members are required to be well trained in Early Childhood Development including safe sleep practices, shaken baby syndrome/abusive head trauma, supervision during high risk activities such as eating and outdoor play. Staff members are also required to have ongoing training for the prevention of sudden infant death syndrome and use of safe sleeping practices and prevention of shaken baby syndrome and abusive head trauma.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- g. Developing infant and toddler components within the state/territory's child care licensing regulations.

**Describe:**

Rules of the Department of Human Services - Licensure Rules for Child Care Agencies Chapter 1240-04-01 require the following: For infants/toddlers, a portion of the day shall include floor time for activities that develop physical, social, language and cognitive skills. Each caregiver shall be responsible for providing consistent care for a specific infant(s)/toddler(s). "Consistent care" includes, but is not limited to: planning and record-keeping for the child, communication, general interaction with and routine care of the child. In infant/toddler rooms, equipment and space shall be provided for climbing, crawling, and pulling without the restraint of playpens or cribs. Toys, educational materials, and play materials shall be organized and displayed within children's reach so that they can select and return items independently. Toys and teaching aids that are small or that have small parts that can be inhaled or swallowed shall be inaccessible to infants and toddlers. Because of the importance of language development and communication skills infants and toddlers shall have language experiences with adults on a daily basis. The licensing regulations requires the management of the agency shall maintain a system that enables all children in the agency's care to receive a level of supervision of their status and activities that is appropriate to their age and their developmental, physical and mental status to ensure children's health and safety. For children six week of age through nine years of age, an adult must be able to hear the child at all times, must be able to see the child with a quick glance, and must be able to physically respond immediately. When infants are cared for in a center with older children, they shall not be grouped with children older than thirty (30) months of age, and a separate area shall be provided for them. Infant and toddler groups may never exceed the required ratios and group sizes; for a single grouping of 8 infants ages weeks to 15 months, the ratio should be 1:4 (one adult per 4 infants/toddlers). For a single grouping of 10 infant/toddlers ages6 weeks to

30 months, the ratio should be 1:5. Staff members are required to be well trained in Early Childhood Development including safe sleep practices, shaken baby syndrome/abusive head trauma, supervision during high risk activities such as eating and outdoor play. Staff members are also required to have ongoing training for the prevention of sudden infant death syndrome and use of safe sleeping practices and prevention of shaken baby syndrome and abusive head trauma.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- h. Developing infant and toddler components within the early learning and developmental guidelines.

Describe:

The most recent standards for children birth-48 months provides a developmentally appropriate framework for parents and caregivers to work together to provide meaningful interactions and activities so that even the youngest children can develop to their fullest potential.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

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

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review



and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

**7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.**

- i. Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development.

Describe:

Extensive resources and information are available to parents through [kidcentraltn.com](http://kidcentraltn.com), a website created to pull information from across state government so parents and providers can more easily find what they need. This comprehensive website includes information about children's health, education, development, and support.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- j. Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being.

Describe:

Infant and Toddler Quality Coaching Growing research continues to reflect that the first three years of life are the most important in terms of brain development.

Because so many children under the age of three spend time in child care while their parents work or attend school, it is imperative that the child care workforce be trained to provide high quality care for these children and their families. Child Care

Resource and Referral Infant and Toddler Quality Coaches provide training, on-site technical assistance, and coaching to child care professionals in the areas of child development, health and safety, behavior management and early childhood education focusing on those children aged three years and under.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- k. Coordinating with child care health consultants.

Describe:

The Tennessee Child Care Resource & Referral Network employs 15 Health, Safety and Well-Being Coaches, who are located throughout the state to promote the health and safety practices in early care and education, promote developmental monitoring and screening, resources and supports for children with disabilities, and information on social and emotional development of children in child care agencies, teachers and families. In addition the lead agency coordinates monthly meetings with the Department of Health to coordinate services, develop policy, and standardized health and safety training.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- l. Coordinating with mental health consultants.

Describe:

The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- m. Establishing systems to collect real time data on available (vacant) slots in ECE settings, by age of child, quality level, and location of program.

Describe:

The Lead Agency is developing a web portal that will allow providers to upload real time data on enrollments.

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- n. Other.

Describe:

- Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)

**7.4.2 Describe the measurable indicators of progress relevant to subsection 7.4 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Lead Agency has significantly increased the number of Infant-Toddler Quality Coaches available through Child Care Resource & Referral (CCR&R) Network Infant-Toddler Quality Coaches provide intense technical assistance and coaching for infant and toddler educators. Tennessee Early Childhood Training Alliance (TECTA) is providing additional coursework, financial assistance, and professional development enhancing support for infant/toddler

teachers, including the introduction of the Tennessee Infant-Toddler Credential. The CCR&R Infant-Toddler Quality Coaches will collaborate with TECTA to convene local peer learning groups for infant and toddler educators across the state and assist TECTA through its partnership with the Tennessee Family Child Care Alliance with further strengthening the quality of infant-toddler care in family and group child care settings.

The new QRIS that will launch in early 2022 will focus on the components and structure below: Strongest Indicators of Successful Child Outcomes

Two Sections of Elements and Indicators:

Health & Safety

Teacher Child Interactions

Quarterly Evaluations with Immediate Feedback to Provider on areas needing Improvement

Annual Score based on Overall Average

Violations Captures through Unmet Elements/Indicators

The Lead Agency will use data from the new QRIS to evaluate progress on improving the quality of child care. Component scores and overall scores will serve as a measure of progress by which improvement can be evaluated over time.

## 7.5 Child Care Resource and Referral

A Lead Agency may expend funds to establish, expand, or maintain a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

### 7.5.1 What are the services provided by the local or regional child care and resource and referral agencies?

Child Care Resource and Referral is a network of agencies housing 44 Quality Coaches, 45 Specialists (15 Infant Toddler, 15 Family Engagement, 15 Health Safety and Well-Being Coaches), 7 Site Coordinators, and 9 Network Management Staff statewide. This network offers free coaching, technical assistance to providers, and training and resources for parents. CCR&R staff offers families consumer information to identify and

better understand the components of high-quality child care as well as answer questions about child care agencies in their geographic areas. For child care agencies, CCR&R staff provides coaching and technical assistance, training, consultation, and supporting materials and resources on such topics that include developmentally appropriate practices, health and safety issues, parent engagement, social/emotional and behavioral health, and best practices across related themes. CCR&R staff also provides child care agencies assistance with program inclusion for children having special needs or on-site consultation problem-solving child care and other health issues. Additionally, the Tennessee Child Care Resource and Referral Network CCR&Rs identify unmet training needs of providers and deliver or facilitate the delivery of resources and training content.

7.5.2 Describe the measurable indicators of progress relevant to subsection 7.5 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

The Lead Agency's measurable indicators may include, but are not limited to: The number of high-quality child care agencies; Complaints validated; Legal enforcements; Delivery of technical assistance, targeted technical assistance, coaching, and peer mentoring; and Violations.

## 7.6 Facilitating Compliance With State Standards

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

**7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.**

**Describe:**

The Lead Agency supports compliance with standards by covering the costs of such necessary health and safety components as background checks, fire inspections, environmental inspections, and immunization audits. Additionally, the Lead Agency provides access to free training, technical assistance, coaching, and peer mentoring that enable providers to achieve and maintain compliance through grants and contracts. To promote safe environments for children, Pediatric First Aid and CPR training and certification has been made available to child care educators and administrators of licensed child care agencies at no cost through CCR&R. The Lead Agency implemented a small grants initiative to provide support and enhancement grants for child care providers to increase capacity, strengthen quality, and/or promote compliance with State licensing standards. The grants include supports for items such as but not limited to: Meeting safety standards or achieving ADA compliance (including health and safety supports such as carbon monoxide/smoke detectors, emergency preparedness kits, etc.); Furnishing existing space to increase capacity; Materials to support learning and educational enrichment (including educationally rich curriculum, curriculum coaches/consultants), promote wellness/physical activity/good nutrition/family engagement, etc.

**7.6.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?**

- No
- Yes. If yes, which types of providers can access this financial assistance?
  - Licensed CCDF providers
  - Licensed non-CCDF providers

License-exempt CCDF providers

Other

Describe:

NA

**7.6.3 Describe the measurable indicators of progress relevant to subsection 7.6 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Lead Agency's measurable indicators may include, but are not limited to: The number of high-quality child care agencies; Complaints validated; Legal enforcements; Delivery of technical assistance, targeted technical assistance, coaching, and peer mentoring; and Violations.

**7.7 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**

**7.7.1 Does the state/territory measure the quality and effectiveness of child care programs and services in both child care centers and family child care homes?**

No

Yes.

If yes, describe any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children.

The Lead Agency is continually evaluating indicators and measurements relevant to these activities and may include but are not limited to: Measurement of scoring associated with Quality Rating and Improvement System. Prior to the March 2020 the QRIS featured program assessments that utilized the appropriate Environment Rating

Scale (ERS) ® to assess its physical environment, basic care, curriculum, schedule, program structure, and the child care professional's conversations and other interactions with the children. The Lead Agency reviewed program assessment scores annually as a means of understanding and evaluating provider improvements. These analyses informed decisions about targeting technical assistance, program planning, workload distribution and resource allocation.

The lead agency has engaged stakeholders across the state to develop a new Quality Rating and Improvement System that will replace the current system in 2022. This new framework is based upon equal importance of health/safety practices and teacher/child interactions.

In response to the circumstances of the pandemic the Lead Agency began using an interim assessment tool in combination with the other report card components to conduct evaluations/measure effective practice in July 2020. The interim tool was developed in partnership with CCR&R. The interim tool will be used until the new QRIS redesign is fully implemented. Scoring generated from the new QRIS will be analyzed moving forward as a measure of program improvement.

The Lead Agency has also explored online tools and technology resources that can improve the efficiency and effectiveness of providers in the child care system and has invested in other strategies such as shared service models to provide resources to strengthen provider capacity.

**7.7.2 Describe the measurable indicators of progress relevant to subsection 7.7 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Lead Agency has worked with numerous external agencies and partners to educate providers with training and a commitment to promoting safe, stable, nurturing relationships with children and their families. The Lead Agency also implemented the TNPAL workforce registry to become the system of record for all training and professional development which



in turn will contribute to a professional development system that enhances the quality of childcare provided.

Component scores from the QRIS overtime have been used as a measure of progress. Timely reporting of individual agency results and statewide and regional trends were used to inform program improvement efforts. Statistically significant improvements in quality have been documented since the beginning of the original QRIS in 2001. The QRIS redesign represents a new framework based upon a balance of health/safety practices and teacher/child interactions that will build upon that foundation moving forward.

## 7.8 Accreditation Support

### **7.8.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?**

- a. Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Is accreditation available for programs serving infants, toddlers, preschoolers and school-age children?  
Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation  
Limited support for accreditation is incorporated within the statewide Quality Rating and Improvement System. Licensed child care centers and homes that are accredited by a recognized entity receive two bonus points when the components scores are calculated. The Lead Agency also provides accreditation support through the Tennessee Early Childhood Training Alliance (TECTA). TECTA offers technical assistance and financial support for child care providers seeking accreditation by either the National Association of Family Child Care (NAFCC), National Early Childhood Program Accreditation (NECPA), or the National Association for the Education of Young Children (NAEYC). Accreditation collaboration with state affiliates

and/or National organizations allows TECTA to provide reliable consistent support based upon best practices for Self-study for earning accreditation status or maintaining the accreditation standards of the accrediting agency. This has been inhibited during the September 2019 and October 2021 time period due to COVID-19 and the focus on meeting and maintaining health and safety requirements due to the virus. Many programs were faced with staff and enrollment issues in order to remain open for service rather than achieving accreditation status.

Accreditation supports include TA or TTA as well as application and maintenance fees.

Family child care mentors are required to be Accredited by NAFCC or being involved in Self-study for attaining Accreditation by NAFCC. The state began the year with 3 NAFCC Accredited Providers but ended the time period with 5 attaining Accreditation status. This was also affected by COVID-19 and many family child care providers were focused on maintaining an open status for families and children served rather than achieving accreditation status. Support is offered for self-study and application or maintenance fee support.

- b. Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- c. Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- d. Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- e. No, but the state/territory is in the in the development phase of supporting accreditation.

- i. Focused on child care centers

Describe:

- ii. Focused on family child care homes

Describe:

- f. No, the state/territory has no plans for supporting accreditation.

**7.8.2 Describe the measurable indicators of progress relevant to subsection 7.8 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

As part of the redesigned QRIS system, the Lead Agency will establish a new baseline level of quality demonstrated across the child care network in Tennessee. From that baseline, the Lead Agency will measure progress in improving the quality of child care programs and services. The Lead Agency also monitors the increase/decrease of accredited agencies annually and will continue to examine the relationship between Accreditation and Program Quality Rating Scores in the new QRIS system.

**7.9 Program Standards**

**7.9.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for:**

- a. Infants and toddlers**

The Lead Agency has implemented the following supports that are applicable all age

ranges.

Health. The Lead Agency works collaboratively with the Tennessee Department of Health (TDH) to strengthen and increase the availability of and access to health-related programs and services for children, families, and child care agencies. Child Care Resource and Referral (CCR&R) implemented a specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on health training and health-related activities.

Mental health. The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators. AIMHiTN supports CCDF partners as well as Tennessee's early care and early education workforce in expanding overall competency in infant and early childhood mental health (IECMH) and embedding IECMH principles into the daily practice of all professionals in an effort to enhance overall quality in child care programs, with a particular focus on infant/toddler quality of care. We support mental health and social emotional development by providing training and technical assistance related to infant and early childhood mental health (IECMH), early relational health, reflective capacity, and self-care for caregivers. We know that responsive and consistent relationships from caregivers support the development of healthy social-emotional skills, which become the foundation of a young child's mental health. Therefore, it is crucial that caregivers for young children have the necessary knowledge and skills to promote healthy development and be able to identify and appropriately address early signs of risk and delays. Here is an explanation of AIMHiTN's overall work focusing on infant and early childhood mental health and a closely related focus of early relational health: An early relational health focus, which ultimately supports infant and early childhood mental health, is rooted in scientific research that points to the earliest years of life as the most critical for brain development. During this time, social and emotional development occurs, forming the brain connections that build the architecture for future growth. The single most crucial ingredient in laying a healthy foundation is caring, nurturing relationships. These foundational relationships are not limited to parents or primary caregivers. Anyone who interacts with infants and young children can profoundly impact their growth and development into healthy, productive members of society. That includes extended family, teachers, pediatricians, other healthcare

providers, and the community at large.

AIMHiTN exists to support infants and young children and the adults who impact their early relational health. Our focus is on prenatal care up to a child's sixth birthday because we know it's those earliest years that matter most. AIMHiTN delivers education, training, and resources to assist caregivers, educators, healthcare providers, and other professionals in their everyday interactions with infants, young children, and their families. Our work helps ensure healthy communities and a productive workforce for generations to come, creating a brighter future for all. Simply put, we support the workforce that supports our future workforce.

Child Care Resource & Referral promotes and supports mental health and social emotional development by providing training and technical assistance on the Pyramid Model (formally known as CSEFEL) and on Building Strong Brains (ACEs) to early childhood educators. The Family Engagement Coaches provide protective factor training that is specific to the social and emotional development of children.

Recognizing the mental burden COVID has inflicted on child care professionals, CCR&R and Child Care WAGE\$ TN® launched the Lean Into You podcast to address their mental well-being. The podcast focuses on topics such as mindset, mindfulness practices, developing emotional intelligence, and practical strategies for incorporating mindfulness in the classroom. To date, Lean Into You has been downloaded over 4,000 times.

Nutrition. Describe the supports: The Lead Agency works collaboratively with TDH to strengthen and increase the availability of and access to nutrition-related programs and services for children, families, and child care agencies. CCR&R is implementing a new specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on nutrition training and nutrition-related activities. In addition, the Child and Adult Care Food Program now resides in the same division with Child Care Services. These programs are working collaboratively to increase participation through general communication and deliberate engagement with the new pre-licensure unit.

Requirements for participation in the Gold Sneaker Initiative were incorporated in the

Rules of the Department of Human Services Report Card and Rated Licensing for Child Care Agencies Rules and will be incorporated in the QRIS redesign scheduled to be implemented in 2022.

Gold Sneaker facilities will: Offer children at least 60 minutes of physical activity per day; Limit television and video viewing to 60 minutes per day of educational programs; Not allow children to remain sedentary or passive for more than 60 minutes continuously; Ensure physical activity is a positive experience; Ensure appropriate feeding patterns, including breastfeeding; Ensure appropriate feeding patterns, including adequate time for meal consumption; Ensure appropriate infant and child feeding patterns, including appropriate portion sizes; Promote a positive attitude toward food; and Maintain a tobacco free campus.

#### **b. Preschoolers**

The Lead Agency has implemented the following supports that are applicable all age ranges.

Health. The Lead Agency works collaboratively with the Tennessee Department of Health (TDH) to strengthen and increase the availability of and access to health-related programs and services for children, families, and child care agencies. Child Care Resource and Referral (CCR&R) implemented a specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on health training and health-related activities.

Mental health. The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators. AIMHiTN supports CCDF partners as well as Tennessee's early care and early education workforce in expanding overall competency in infant and early childhood mental health (IECMH) and embedding IECMH principles into the daily practice of all professionals in an effort to enhance overall quality in child care programs, with a particular focus on infant/toddler quality of care. We support mental health and social emotional development by providing training and technical assistance related to infant and early childhood mental health (IECMH), early relational health, reflective capacity, and self-care for caregivers. We know that responsive and

consistent relationships from caregivers support the development of healthy social-emotional skills, which become the foundation of a young child's mental health. Therefore, it is crucial that caregivers for young children have the necessary knowledge and skills to promote healthy development and be able to identify and appropriately address early signs of risk and delays. Here is an explanation of AIMHiTN's overall work focusing on infant and early childhood mental health and a closely related focus of early relational health: An early relational health focus, which ultimately supports infant and early childhood mental health, is rooted in scientific research that points to the earliest years of life as the most critical for brain development. During this time, social and emotional development occurs, forming the brain connections that build the architecture for future growth. The single most crucial ingredient in laying a healthy foundation is caring, nurturing relationships. These foundational relationships are not limited to parents or primary caregivers. Anyone who interacts with infants and young children can profoundly impact their growth and development into healthy, productive members of society. That includes extended family, teachers, pediatricians, other healthcare providers, and the community at large.

AIMHiTN exists to support infants and young children and the adults who impact their early relational health. Our focus is on prenatal care up to a child's sixth birthday because we know it's those earliest years that matter most. AIMHiTN delivers education, training, and resources to assist caregivers, educators, healthcare providers, and other professionals in their everyday interactions with infants, young children, and their families. Our work helps ensure healthy communities and a productive workforce for generations to come, creating a brighter future for all. Simply put, we support the workforce that supports our future workforce.

Child Care Resource & Referral promotes and supports mental health and social emotional development by providing training and technical assistance on the Pyramid Model (formally known as CSEFEL) and on Building Strong Brains (ACEs) to early childhood educators. The Family Engagement Coaches provide protective factor training that is specific to the social and emotional development of children.

Recognizing the mental burden COVID has inflicted on child care professionals, CCR&R and Child Care WAGE\$ TN® launched the Lean Into You podcast to address their mental well-being. The podcast focuses on topics such as mindset, mindfulness

practices, developing emotional intelligence, and practical strategies for incorporating mindfulness in the classroom. To date, Lean Into You has been downloaded over 4,000 times.

Nutrition. Describe the supports: The Lead Agency works collaboratively with TDH to strengthen and increase the availability of and access to nutrition-related programs and services for children, families, and child care agencies. CCR&R is implementing a new specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on nutrition training and nutrition-related activities. In addition, the Child and Adult Care Food Program now resides in the same division with Child Care Services. These programs are working collaboratively to increase participation through general communication and deliberate engagement with the new pre-licensure unit.

Requirements for participation in the Gold Sneaker Initiative were incorporated in the Rules of the Department of Human Services Report Card and Rated Licensing for Child Care Agencies Rules and will be incorporated in the QRIS redesign scheduled to be implemented in 2022.

Gold Sneaker facilities will: Offer children at least 60 minutes of physical activity per day; Limit television and video viewing to 60 minutes per day of educational programs; Not allow children to remain sedentary or passive for more than 60 minutes continuously; Ensure physical activity is a positive experience; Ensure appropriate feeding patterns, including breastfeeding; Ensure appropriate feeding patterns, including adequate time for meal consumption; Ensure appropriate infant and child feeding patterns, including appropriate portion sizes; Promote a positive attitude toward food; and Maintain a tobacco free campus.

[c. and/or School-age children.](#)

The Lead Agency has implemented the following supports that are applicable all age ranges.

Health. The Lead Agency works collaboratively with the Tennessee Department of Health (TDH) to strengthen and increase the availability of and access to health-related programs and services for children, families, and child care agencies. Child Care



Resource and Referral (CCR&R) implemented a specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on health training and health-related activities.

Mental health. The Lead Agency works with Tennessee the Association of Infant Mental Health in Tennessee (AIMHiTN), Tennessee Early Childhood Training Alliance, and CCR&R to promote social emotional and behavioral health supports for children, families, and early childhood educators. AIMHiTN supports CCDF partners as well as Tennessee's early care and early education workforce in expanding overall competency in infant and early childhood mental health (IECMH) and embedding IECMH principles into the daily practice of all professionals in an effort to enhance overall quality in child care programs, with a particular focus on infant/toddler quality of care. We support mental health and social emotional development by providing training and technical assistance related to infant and early childhood mental health (IECMH), early relational health, reflective capacity, and self-care for caregivers. We know that responsive and consistent relationships from caregivers support the development of healthy social-emotional skills, which become the foundation of a young child's mental health. Therefore, it is crucial that caregivers for young children have the necessary knowledge and skills to promote healthy development and be able to identify and appropriately address early signs of risk and delays. Here is an explanation of AIMHiTN's overall work focusing on infant and early childhood mental health and a closely related focus of early relational health: An early relational health focus, which ultimately supports infant and early childhood mental health, is rooted in scientific research that points to the earliest years of life as the most critical for brain development. During this time, social and emotional development occurs, forming the brain connections that build the architecture for future growth. The single most crucial ingredient in laying a healthy foundation is caring, nurturing relationships. These foundational relationships are not limited to parents or primary caregivers. Anyone who interacts with infants and young children can profoundly impact their growth and development into healthy, productive members of society. That includes extended family, teachers, pediatricians, other healthcare providers, and the community at large.

AIMHiTN exists to support infants and young children and the adults who impact their early relational health. Our focus is on prenatal care up to a child's sixth birthday because we know it's those earliest years that matter most. AIMHiTN delivers education, training,

and resources to assist caregivers, educators, healthcare providers, and other professionals in their everyday interactions with infants, young children, and their families. Our work helps ensure healthy communities and a productive workforce for generations to come, creating a brighter future for all. Simply put, we support the workforce that supports our future workforce.

Child Care Resource & Referral promotes and supports mental health and social emotional development by providing training and technical assistance on the Pyramid Model (formally known as CSEFEL) and on Building Strong Brains (ACEs) to early childhood educators. The Family Engagement Coaches provide protective factor training that is specific to the social and emotional development of children.

Recognizing the mental burden COVID has inflicted on child care professionals, CCR&R and Child Care WAGE\$ TN® launched the Lean Into You podcast to address their mental well-being. The podcast focuses on topics such as mindset, mindfulness practices, developing emotional intelligence, and practical strategies for incorporating mindfulness in the classroom. To date, Lean Into You has been downloaded over 4,000 times.

Nutrition. Describe the supports: The Lead Agency works collaboratively with TDH to strengthen and increase the availability of and access to nutrition-related programs and services for children, families, and child care agencies. CCR&R is implementing a new specialist team of Health, Safety, and Well-Being Quality Coaches who provide direct support for child care agencies on nutrition training and nutrition-related activities. In addition, the Child and Adult Care Food Program now resides in the same division with Child Care Services. These programs are working collaboratively to increase participation through general communication and deliberate engagement with the new pre-licensure unit.

Requirements for participation in the Gold Sneaker Initiative were incorporated in the Rules of the Department of Human Services Report Card and Rated Licensing for Child Care Agencies Rules and will be incorporated in the QRIS redesign scheduled to be implemented in 2022.

Gold Sneaker facilities will: Offer children at least 60 minutes of physical activity per day;

Limit television and video viewing to 60 minutes per day of educational programs; Not allow children to remain sedentary or passive for more than 60 minutes continuously; Ensure physical activity is a positive experience; Ensure appropriate feeding patterns, including breastfeeding; Ensure appropriate feeding patterns, including adequate time for meal consumption; Ensure appropriate infant and child feeding patterns, including appropriate portion sizes; Promote a positive attitude toward food; and Maintain a tobacco free campus.

**7.9.2 Describe the measurable indicators of progress relevant to subsection 7.9 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.**

The Lead Agency is continually evaluating indicators and measurements relevant to these activities that may include but are not limited to: Scoring components of QRIS; Professional development delivered to early care and educators; Child care agency participation in the Gold Sneaker initiative; Delivered trainings, technical assistance, targeted technical assistance, coaching, and mentoring.

**7.10 Other Quality Improvement Activities**

**7.10.1 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures. Describe:**

Below are examples of initiatives that were implemented to improve the quality of child care services.

### Child Care WAGE\$ Tennessee

The Child Care WAGE\$® Tennessee program is an education-based salary supplement program for child care educators employed in DHS Licensed Child Care agencies. This program provides eligible educators an annual award, issued in two parts, based on specific qualifications that include working at least six months in the same child care program with children birth to five years old for at least 10 hours a week. An educator with six credit hours in early childhood education will receive a yearly supplement of \$400. The supplement rises with experience up to \$5,200 a year for eligible educators with a master's degree. Visit the Signal Centers, Inc. website at [www.tnwages.org](http://www.tnwages.org) for more information. As of April 2021, more than 1,200 educators have received a supplement through the program totaling over 2 million in support.

### Shared Services and Resources

A wide array of resources including business management tools, human resource tools, program administration tools, classroom resources, and templates, i.e. emergency preparedness plans, were made available at no cost to child care agencies licensed by the Lead Agency through an online centralized knowledge resource that aligns with State requirements. These tools equip and better enable child care administrators and educators to focus more on the child care side of their agency and less on developing business practices from scratch.

In addition to shared services, DHS Licensed Child Care agencies also had access to group and bulk purchasing for commonly used supplies at discounted pricing. During FFY 2020, the program included 2,193 agencies serving 154,485 children (1,664 Centers, 296 Group Homes, 233 Family Homes). ChildcareTennessee registered 98.9% of eligible child care agencies in all 95 counties. Among shared services categories are Financial Services, Facility Cleaning, Food Delivery & Supplies, Consulting/Administrative, School Supplies, and Mental/Physical Health. Website traffic characteristics included: 169,039 – Pageviews, 4.20 – Pages per session, 07:18 – Average time on page. The full end of year report is available at: <https://9ve.ed8.myftpupload.com/wp-content/uploads/2020/10/ChildcareTN-End-of-Year-Report-7x9-Booklet.pdf> For more information on Shared Services and Resources please visit The Community Foundations of Middle Tennessee, Inc. website: <https://www.cfmt.org/childcarenennessee-dhs/>

### Enhancement Mini Grants

Enhancement grants were available to qualifying TDHS Licensed Child Care agencies that specifically support either quality improvement, promote compliance with licensure rules , and or increase capacity enhancement. Agencies may apply for up to \$4,000 (up to or \$5,000 for distressed counties) to support these enhancements. During the first year of program nearly \$5 million in support and enhancement grants were awarded. Grants were received by 1,289 licensed child care providers (904 Centers, 221 Group Homes, 164 Family Homes).

For more details, please visit The Community Foundation of Middle Tennessee, Inc.

Website: <https://www.cfmt.org/childcaretennessee-dhs/>

### Pediatric First Aid and CPR Training/Certification

To promote safe environments for children, Pediatric First Aid and CPR training and certification will be available to child care educators and administrators of licensed child care agencies at no cost. For more information on training and certification dates, please visit Child Care Resource and Referral's (CCR&R) website: <https://www.tnccrr.org/> Despite the impact of the pandemic 1,295 professionals completed the training by the end of FFY 2020.

### Business Academies

Small Business Academies are available to promote best practices and strengthen business operations for child care agencies. The focus of the academies are in the areas of:

- Budgets, Projections, and Planning
- Financial Reports and Internal Controls
- Marketing for Child Care Programs
- Staff Recruitment and Retention for Center-based Child Care Programs

For more information, please visit the Child Care Resource & Referral website at

<https://www.tnccrr.org/>

### **Infant Toddler Care Specialization**

The Lead Agency is exploring additional supports for professional development opportunities for infant-toddler educators. With the goal of increasing the quality of care for infants and toddlers in the state, Tennessee's CCR&R network would develop a specialization that can lead to the TECTA academic Infant-Toddler Credential and the AIMHiTN Infant Family Associate Endorsement®. Currently, TECTA Infant and Toddler Orientation delivers 30 hours of training that provides a broad overview on infant and toddler care. The Infant and Toddler Credential is available for those infant and toddler educators who already have

completed college course credit. The Infant and Toddler Care Specialization (ITCS) will provide an additional path to quality professional development for educators who are not ready for college course work, who want to go deeper into the content than is provided by the Infant and Toddler Orientation, and/or educators who do not currently qualify for the Infant and Toddler Credential.

### **The Lead Agency is exploring a collaborative partnership project on Infant and Toddler Wellness and Reflection**

This is a collaboration between CCR&R, TECTA, and AIMHiTN to support the infant and toddler workforce. Elements of the collaboration may include Infant/Toddler quality coaches to support social and emotional development in the classroom, using resources such as the *Pyramid Model*, *Conscious Discipline*, and *Building Strong Brains* in their trainings, TTA and coaching. With support from AIMHiTN, they may incorporate reflective conversation with infant and toddler educators. IT Coaches may help provide support to infant and toddler educators as they apply for the AIMHi Endorsement®. TECTA may support the project through updated orientation curriculum and engagement of the Family Child Care advisors and educators. AIMHiTN may provide reflective conversation support to the IT Coaches, TECTA staff and Family Child Care advisors.

### **Health and Well-Being**

The Lead Agency is exploring with the CCR&R network additional resources for early childhood educators as they need assistance to support the social and emotional wellness of the children in their classrooms. There is a proposed shift of the Health and Wellness Quality Coaches to guide this support. The primary focus of the HWB coaches will be social and emotional health which can include but is not limited to the *Pyramid Model* and *Conscious Discipline*, Building Strong Brains, ACEs and trauma informed care.

### **Inclusion Quality Coaches and Program:**

#### **Inclusion**

The Lead Agency is exploring opportunities with quality partners to expand training and supports for child care agencies to offer high quality services for children with disabilities in care. In order to increase access, participation and supports for children with disabilities in licensed DHS child care agencies, we are exploring a plan that is supported by Inclusion Coaches, located throughout the state. A coaching plan could provide the opportunity for the

Inclusion Coach to work with the educator and the parents to provide any individualized accommodations and supports that may be necessary for all children to participate in activities and build relationships with their peers. Finally, a coaching plan could allow the Inclusion Coach to provide the necessary supports that will increase the knowledge, skills and personal temperaments of the educator and director while providing quality inclusion services to the children and families. In addition, the Inclusion Coaches could work closely with directors to help directors create program policies and procedures to ensure they promote a quality inclusive early childhood program.

### **Tech Goes Home: Closing the Digital Divide for Early Education Professionals and Small Business Owners.**

As mentioned in Section four, the Lead Agency is exploring opportunities to minimize the tech divide for child care agencies. From ongoing professional development or pursuing higher education, to classroom management, to small business marketing and taxes, to communicating with parents: Internet access, technology and a level of comfort using both are essential to succeeding in the field. Hands-on training, however — particularly for the fundamental skills necessary for professional growth and business success — is often lacking, falling on already overtaxed educators to solve for themselves. The Lead Agency is exploring a model, utilizing expert trainers trusted in the communities they serve, that could offer digital skills training, a brand new device and assistance with low-cost home Internet access to all participants. This model, working in collaboration with the CCR&R Network's Small Business Academy staff and expert coaches, could support small business, pedagogical and professional best practices in licensed child care statewide. This model could include expert early education technology trainers, to provide foundational technology training, ongoing coaching and help desk assistance, aligned with CCR&R Small Business Academy training and resource provision and in corresponding service delivery areas.

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

### 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

**8.1.1 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:**

- a. Verifying and processing billing records to ensure timely payments to providers



**Describe:**

The Lead Agency is developing a payment schedule in the issuance of funds to ensure proper and consistent billing cycles. Reimbursement of child care providers contracting to participate in the Child Care Certificate Program are made consistent with the Lead Agency's Policy 11.35 *Child Care Certificate Program Reimbursement*. The Lead Agency's program staff review submitted invoices from its subrecipients and contractors for accuracy and allowability; if no questions or concerns are noted or apparent, the invoice is approved and presented to Fiscal Services for payment, typically within 5-7 business days.

**b. Fiscal oversight of grants and contracts**

**Describe:**

Fiscal oversight of the Lead Agency's grants and contracts includes multiple levels of review and approval from inception to execution. Upon execution and as services are rendered, the Lead Agency's program staff review submitted invoices for accuracy and allowability prior to approval and presentation to Fiscal Services for payment. Fiscal Services reviews services provided for proper recording of expenditures in the State's accounting system. Program staff record payments against maximum liability of the grants or contracts to ensure vendors are paid timely and within contract terms.

**c. Tracking systems to ensure reasonable and allowable costs**

**Describe:**

Lead Agency program staff review and approve invoices for allowability of quality expenditures while identifying earmarking requirements, recorded by each vendor for tracking requirements. Fiscal Services provides earmarking reports to program management to ensure reasonableness and accuracy of recorded costs.

**d. Other**

**Describe:**

**8.1.2 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:**

- a. Conduct a risk assessment of policies and procedures

Describe:

The Lead Agency conducts an annual risk assessment of the CCDF Program. Strategies to mitigate risk are continuously incorporated into new policies or program design elements.

- b. Establish checks and balances to ensure program integrity

Describe:

During monitoring visits Licensing Consultants compare agency daily attendance sign-in documents with the Electronic Attendance Verification documents submitted by the agency to identify unintentional errors or potential fraud.

- c. Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

Quality Assurance eligibility reviews of cases are performed by the Quality Improvement and Strategic Solution (QISS) Division yearly. Case reading results are disseminated to Child Care Certificate Program Management for review.

- d. Other

Describe:

**8.1.3 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)), including processes to train child care providers and staff of the Lead Agency and other agencies engaged in the administration of CCDF about program requirements and integrity.**

- a. Check and describe how the state/territory ensures that all providers for children

receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.

- i. Issue policy change notices.

Describe:

The Lead Agency issues notices to providers as needed to inform them of any changes in policy or procedures.

- ii. Issue policy manual.

Describe:

- iii. Provide orientations.

Describe:

- iv. Provide training.

Describe:

The Lead Agency provides training on program requirements as needed. One example is the training provided on how to use the EAV pay system.

- v. Monitor and assess policy implementation on an ongoing basis.

Describe:

Internal audit participates in the policy review process.

- vi. Meet regularly regarding the implementation of policies.

Describe:

- vii. Other.

Describe:

Provider contracts are updated as needed to clarify expectations/program requirements.

b. Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity (98.68 (a)(3)). Check all that apply:

- i. Issue policy change notices.

Describe:

The Lead Agency issues notices to providers as needed to inform them of any changes in policy or procedures.

- ii. Train on policy change notices.

Describe:

The Lead Agency provides training on program requirements as needed.

- iii. Issue policy manuals.

Describe:

- iv. Train on policy manual.

Describe:

- v. Monitor and assess policy implementation on an ongoing basis.

Describe:

- vi. Meet regularly regarding the implementation of policies.

Describe:

Information about program requirements/integrity is also disseminated to staff during monthly conferences with supervisors, monthly unit meetings, and monthly all staff meetings.

- vii. Other.

Describe:

**8.1.4 Describe the processes in place to regularly evaluate Lead Agency internal control activities (98.68 (a)(4)). Describe:**

QISS conducts a modified state review sample based upon the ACF 403 criteria (used in the cohort 2 review) every year to monitor the error rate during the years between the formal ACF-404 submissions. The Lead Agency also conducts an annual risk management

exercise to evaluate internal controls and evaluate contract language as needed to support requirements.

**8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.**

a. Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent fraud or intentional program violations**. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations.

- i. Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe the activities and the results of these activities:

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

Provider daily attendance sign-in/out documentation is compared with the Electronic Attendance Verification (EAV) submissions reported by the provider to identify unintentional errors or potential fraud. The Lead Agency is developing an automated attendance and tracking system for families to sign-in/out their children using a web-based attendance and tracking system. The system will flag anomalies

in reported attendance submissions. Implementation of the new attendance and tracking system is scheduled for March 2022.

Lead Agency program and fiscal staff perform reviews of EAV documentation submitted by child care providers contracting to participate in the Child Care Certificate Program (CCCP) each billing cycle consistent with Policy 11.35 *Child Care Certificate Program Reimbursement*. Review of EAV documentation may include indications of excessive absences, inconsistencies in enrollment status, a lack of variation in attendance, and other indicators. If documentation is questionable, Fiscal Services coordinates with CCCP staff to review and provide guidance before payment approval.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

v. Audit provider records.

Describe the activities and the results of these activities:

The Lead Agency's Audit Services Division conducts audit reviews of providers based on periodic risk assessments, recommendations from program management, and/or complaints. The numbers of reviews vary year to year due to the size and number providers and available resources. Audit Services performs onsite and/or desk reviews of provider records. Audit Services also interviews appropriate staff to evaluate internal controls and the risk of fraud, waste, or abuse.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

vii. Other

Describe the activities and the results of these activities:

The Lead Agency's Office of Inspector General investigates fraud and intentional

program violations. The recovery of funds associated with fraud or intentional program violations is a joint effort between the Lead Agency's' CCDF program, Fiscal Services, and Office of General Counsel in coordination with the State of Tennessee Attorney General's Office.

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

If a child care provider is selected by the Lead Agency's Audit Services Division to audit or is referred as a complaint, then a provider's daily attendance sign-in/out documentation are compared with the Electronic Attendance Verification documentation submitted by the provider to identify unintentional errors or potential fraud.

Audits of provider records are conducted based upon random samples or may be conducted in response to specific complaints. Audits of provider records are

conducted based upon random samples or may be conducted in response to specific complaints. Audit reviews are conducted based on Policy 11.31 Child Care Certificate Program Questioned and Disallowed Cost Process. When a review is conducted, the auditor will provide an Audit Review Report to the child care agency requesting a corrective action plan based on findings and identified question costs and copy program management on the report. Program Management follows policy 11.31 to issue Management Decision Letters if costs are disallowed and recoupment options. There are timeframes for requests and responses outlined in the policy to support overall compliance with the provider contract.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

v. Audit provider records.

Describe the activities and the results of these activities:

The DHS Lead Agency's Audit Services Division conducts audit reviews of providers based on periodic risk assessments, recommendations from program management, and/or complaints. The numbers of reviews vary from one year to year another due to the size of and number of providers and available resources. Audit Services performs onsite and/or desk reviews of provider's records. Audit Services also interviews appropriate staff to evaluate internal controls and the risk of fraud, waste, or abuse.

Audits of provider records are conducted based upon random samples or may be conducted in response to specific complaints. Audits of provider records are conducted based upon random samples or may be conducted in response to specific complaints. Audit reviews are conducted based on Policy 11.31 Child Care Certificate Program Questioned and Disallowed Cost Process. When a review is conducted, the auditor will provide an Audit Review Report to the child care agency requesting a corrective action plan based on findings and identified question costs and copy program management on the report. Program Management follows policy 11.31 to issue Management Decision Letters if costs are disallowed and recoupment options. There are timeframes for requests and responses outlined in



the policy to support overall compliance with the provider contract.

- vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

- vii. Other

Describe the activities and the results of these activities:

The Lead Agency's Office of Inspector General - Division of Audit Services receives complaint referrals from multiple sources and conducts monitoring reviews of child care providers due to the complaint. No results were determined to indicate potential fraud or intentional program violations requiring further investigation.

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

- ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

- iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

Staff within the child care licensing unit review provider records including review of attendance records during monitoring visits and refer any anomalies to audit

services. Examples of anomalies may include but are not limited to: child consistently reported as absent sporadically throughout but not twenty (20) consecutive days, child listed as FT, but attendance logs indicate only PT or vice versa. Program provides Fiscal guidelines for payment. Fiscal uses Attendance logs (EAVs) to base payment in the TCCMS system. Adjustments to payments are made based on these attendance logs. If a question arises, Fiscal reaches out to Program (lead Agency) for guidance prior to payment.

**iv. Conduct supervisory staff reviews or quality assurance reviews.**

**Describe the activities and the results of these activities:**

Child Care Certificate Program supervisory staff review cases to monitor for accuracy in determining eligibility based on points of eligibility as required in policy. The review is based on a random sample of cases provided to supervisory staff from our Division of Quality Improvement and Strategic Solutions. The review is completed using an automated tool and results are recorded. Each unit is to maintain an average score of 92 each month. Scores that fall below will be discussed with the individual employee during their monthly conference reviews to discuss areas of improvement. Corrective action may be taken if there is not overall improvement.

**v. Audit provider records.**

**Describe the activities and the results of these activities:**

Audits of provider records are conducted based upon random samples or may be conducted in response to specific complaints. Audits of provider records are conducted based upon random samples or may be conducted in response to specific complaints. Audit reviews are conducted based on Policy 11.31 Child Care Certificate Program Questioned and Disallowed Cost Process. When a review is conducted, the auditor will provide an Audit Review Report to the child care agency requesting a corrective action plan based on findings and identified question costs and copy program management on the report. Program Management follows policy 11.31 to issue Management Decision Letters if costs are disallowed and recoupment options. There are timeframes for requests and responses outlined in the policy to support overall compliance with the provider contract.

- vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff are trained on policy changes and in response to audit findings.

- vii. Other

Describe the activities and the results of these activities:

Administrative and payment errors are detected through the ACF-403 case review tool conducted by the Lead Agency's QISS Division. QISS conducts state reviews of a limited sample based upon the ACF 403 criteria in off cycle years to monitor the error rate during the time between the formal certificate reviews. TN will use this review to monitor for program improvements between cohort 2 Certificate Review periods.

#### **8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

- a. Identify what agency is responsible for pursuing fraud and overpayments (e.g. State Office of the Inspector General, State Attorney).

To date, there has been only one case that resulted from fraud. In this case, the courts have established Court Orders for restitution and amounts collected are remitted to the lead agency's Fiscal Office.

For overpayments, the State Attorney General's Office is the state's debt collector, but only attempts to collect after referral received from lead agency's Office of General Counsel and only after referred from Child Care Services after unsuccessful attempts to collect from provider.

#### **8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

- b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the

description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:

- i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

- ii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iii. Recover through repayment plans.

Describe the activities and the results of these activities:

In cases determined not to be fraudulent, recovery of child care overpayments and establishment of repayment plans for providers and parents will be developed based on the Lead Agency's policy and procedures to send management decision letters, billing notices, negotiate repayment plans and, when necessary, pursue collection efforts if the prior actions are unsuccessful. Child Care Services may establish a repayment plan that allows the agency to repay funds over a designated period of time. Fiscal services executes the plan by off-setting future payments by the agreed amount to repay. Child Care Services monitors the status the repayment of the plan and implements remedies for non-compliance if the installment plan is violated.

- iv. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

If a provider continues to receive payments through their participation in the Child Care Certificate Program, deducting a designated amount/percentage from each pay period may be an option in some instances allowing the Lead Agency to recover overpayments while lessening the financial impact on the day to day operations of the provider.

v. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

vi. Recover through other means.

Describe the activities and the results of these activities:

If Child Care Services is unable to establish a repayment plan and has made unsuccessful attempts to collect. The Lead Agency's Office of General Counsel refers uncollectible improper payments to the state Attorney General Office for collection efforts. The Lead Agency receives payments resulting from judgments where a legal determination of fraud has been adjudicated by the courts.

vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

viii. Other

Describe the activities and the results of these activities:

The Lead Agency's Office of Inspector General (OIG) determines the appropriateness of engaging the ACF OIG and/or Tennessee Office of the Comptroller in cases of fraud, waste, or abuse. These activities maximize the available options for recovering improper payment due to fraud and can serve as a deterrent to help prevent future fraud. These strategies have resulted in the recovery of identified improper payments, whether due to fraud or other circumstances.

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

c. Check and describe any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

i. N/A. the Lead Agency does not recover misspent funds due to unintentional program violations.

- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

- iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iv. Recover through repayment plans.

Describe the activities and the results of these activities:

In cases determined not to be fraudulent, recovery of child care overpayments and disallowed costs establishment of repayment plans for providers and parents will be developed on a case-by-case decision based on the Lead Agency's policies and procedures. Child Care Certificate Program (CCCP) may establish a repayment plan that allows a provider to repay funds over a designated period of time. Fiscal Services executes the plan by offsetting future payments based on the established repayment plan. Child Care Services monitors the status the repayment of the plan and implements remedies for non-compliance if the repayment plan is violated.

- v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

In cases determined not to be fraudulent, recovery of child care overpayments and disallowed costs establishment of repayment plans for providers and parents will be developed on a case-by-case decision based on DHS the Lead Agency's policies and procedures. Child Care Certificate Program (CCCP) may establish a repayment plan that allows the agency a provider to repay funds over a designated period of time. Fiscal Services executes the plan by offsetting future payments by the agreed amount to repay based on the established repayment plan. Child Care Services monitors the status the repayment of the plan and implements remedies for non-compliance if the installment repayment plan is violated.

- vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

vii. Recover through other means.

Describe the activities and the results of these activities:

In cases determined not to be fraudulent, recovery of child care overpayments and disallowed costs may be made by providers through one-item lump-sum payments. If Child Care Services is unable to establish a repayment plan and has made unsuccessful attempts to collect, the Lead Agency's Office of General Counsel refers uncollectible improper payments to the state Attorney General Office for collection efforts.

viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

ix. Other

Describe the activities and the results of these activities:

If Child Care Services is unable to establish a repayment plan and has made unsuccessful attempts to collect, the Lead Agency's Office of General Counsel refers uncollectible overpayments to the state Attorney General Office for collection efforts. These referrals allow the Lead Agency to maximize the potential for recovering improper payments.

8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

d. Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

i. N/A. the Lead Agency does not recover misspent funds due to agency errors.

- ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

- iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

- iv. Recover through repayment plans.

Describe the activities and the results of these activities:

In cases determined not to be fraudulent, recovery of child care overpayments and establishment of repayment plans for providers and parents will be developed based on DHS policy and procedures. Child Care Services may establish a repayment plan that allows the agency to repay funds over a designated period of time. Fiscal services executes the plan by offsetting future payments by the agreed amount to repay. Child Care Services monitors the status the repayment of the plan and implements remedies for non-compliance if the installment plan is violated.

- v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

If an agency continues to receive payments through their participation in the Child Care Certificate program, deducting a designated amount/percentage from each pay period may be an option in some instances that allows the lead agency to recoup the money while lessening the financial impact on the day-to-day operations of the agency.

- vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

- vii. Recover through other means.

Describe the activities and the results of these activities:

In cases of improper payments due to errors, the Lead Agency recovers child care



overpayments from providers through one-item lump-sum payments. If Child Care Services is unable to establish a repayment plan and has made unsuccessful attempts to collect. The Lead Agency's Office of General Counsel refers uncollectible improper payments to the state Attorney General Office for collection efforts. Those collection efforts have resulted in measurable results, with collections being established in cases where the agency is still in existence and has assets. In some instances, the AG's office may pursue collection litigation while in other instances, they may be able to negotiate a successful repayment plan when the Lead Agency could not.

- viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

- ix. Other

Describe the activities and the results of these activities:

**8.1.7 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:**

- a. Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe the activities and the results of these activities:

Clients appeal through the administrative hearing process with the lead agency's Division of Appeals and Hearings as outlined in policy 7.05 (Smart Steps Child Care Appeal) and policy 7.06 (Child Care Payment Assistance Appeal Process). In some instances, parents may no longer be eligible to participate in the program if the circumstances associated with the case are egregious.

- b. Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe the activities and the results of these activities:

The Lead Agency CCDF Program Management would terminate the provider contract.

The Lead Agency decision is final and is not appealable. In some instances, providers may no longer be eligible to participate in the program if the circumstances associated with the case are egregious.

c. Prosecute criminally.

Describe the activities and the results of these activities:

In egregious or incidents of suspected criminal activity or fraud, referrals to appropriate federal or state law enforcement agencies for prosecution may be warranted. In such instances, referrals to the federal or state agencies may be necessary to ensure that the full extent of the law can be applied to the situation and to serve as a deterrent to reduce future fraud.

d. Other.

Describe the activities and the results of these activities:

## Appendix A: MRS, Alternative Methodology and Narrow Cost Analysis Waiver Request Form

Lead Agencies may apply for a temporary waiver for the Market Rate Survey or ACF pre-approved alternative methodology and/or the narrow cost analysis in. These waivers will be considered "extraordinary circumstance waivers" to provide relief from the timeline for completing the MRS or ACF pre-approved alternative methodology and the narrow cost analysis during the COVID-19 pandemic. These waivers are limited to a one-year period.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in Section 4, questions 4.2.1 and 4.2.5.

To submit a Market Rate Survey (MRS) or ACF pre-approved alternative methodology or a Narrow Cost Analysis waiver, complete the form below.

Check and describe each provision for which the Lead Agency is requesting a time-limited waiver extension.

**Appendix A.1: The Market Rate Survey (MRS) or ACF pre-approved alternative methodology (See related question 4.2.1.)**

1. Describe the provision (MRS or ACF pre-approved alternative methodology) from which the state/territory seeks relief. Include the reason why the Lead Agency is seeking relief from this provision due to this extraordinary circumstance.

Due to the extraordinary circumstances of the pandemic, the Lead agency is seeking relief from the requirement to have completed Market Rate Survey within the two year window prior to the plan submission date. The Lead Agency collected information from stakeholders and was scheduled to conduct the MRS/Cost of Care analysis in March of 2020 but postponed that effort due to the extraordinary circumstances that resulted from the pandemic. During that time, most providers were experiencing significantly lower enrollment and ongoing temporary or extended closures under the circumstances of the pandemic that threatened the sustainability of their operations. The Lead Agency was mindful of not adding any additional burden on providers at this time and recognized that information collected would be skewed due to the extraordinary circumstances. Therefore, the cost of care survey was revised with additional feedback from stakeholders and questions were added to capture additional information about how operations and costs have changed under the circumstances of the pandemic. The data collection for the MRS/Cost of Care analysis began in March 2021 and will be completed by mid-July. The final results of MRS/Cost of Care analysis are expected to be finalized by early fall. The last qualifying MRS was conducted in 2018.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

Allowing the Lead Agency additional time to conduct the MRS/Cost of Care analysis will enable us to gather more accurate information upon which to base decisions about setting provider rates and to better understand how operations and costs have changed as a result of the pandemic.

3. 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, because allowing the waiver does not alter the Lead Agency's normal process for considering rate increases. The Lead Agency must submit recommendations for any rate increases as part of an annual state budget process in October. The information collected through the MRS/Cost of Care analysis will be available in time to inform those recommendations. Completion of the MRS/Cost of Care Analysis does not impact the monitoring or complaint investigation process.

**Appendix A.2: The Narrow Cost Analysis (See related question 4.2.5.)**

1. Describe the provision (Narrow Cost Analysis) from which the state/territory seeks relief. Include the reason why in these extraordinary circumstances, the Lead Agency is seeking relief from this provision.

Due to the extraordinary circumstances of the pandemic, the Lead agency is seeking relief from the requirement to have completed Market Rate Survey within the two year window prior to the plan submission date. The Lead Agency collected information from stakeholders and was scheduled to conduct the MRS/Cost of Care analysis in March of 2020 but postponed that effort due to the extraordinary circumstances that resulted from the pandemic. During that time, most providers were experiencing significantly lower enrollment and ongoing temporary or extended closures under the circumstances of the pandemic that threatened the sustainability of their operations. The Lead Agency was mindful of not adding any additional burden on providers at this time and recognized that information collected would be skewed due to the extraordinary circumstances. Therefore, the cost of care survey was revised with additional feedback from stakeholders and questions were added to capture additional information about how operations and costs have changed under the circumstances of the pandemic. The data collection for the MRS/Cost of Care analysis began in March 2021 and will be completed by mid-July. The final results of MRS/Cost of Care analysis are expected to be finalized by early fall. The last qualifying MRS was conducted in 2018.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

Allowing the Lead Agency additional time to conduct the MRS/Cost of Care analysis will enable us to gather more accurate information upon which to base decisions about setting provider rates and to better understand how operations and costs have changed as a result of the pandemic.

3. 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, because allowing the waiver does not alter the Lead Agency's normal process for considering rate increases. The Lead Agency must submit recommendations for any rate increases as part of an annual state budget process in October. The information collected through the MRS/Cost of Care analysis will be available in time to inform those recommendations. Completion of the MRS/Cost of Care Analysis does not impact the monitoring or complaint investigation process.