Child Care and Development Fund (CCDF) Plan
For
Mississippi
FFY 2016-2018

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1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency 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))

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

Identify the Lead Agency or joint inter-agency office designated by the State/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))

Name of Lead Agency: Mississippi Department of Human Services

Address of Lead Agency: 750 N State Street, Jackson, MS 39202

Name and Title of the Lead Agency Official: Mr. John Davis, Executive Director

Phone Number: 601-359-4480

E-Mail Address: john.davis@mdhs.ms.gov

Web Address for Lead Agency (if any): www.mdhs.ms.gov

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/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 entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Cathy Sykes

Title of CCDF Administrator: Deputy Administrator for Programs, Mississippi Department of Human Services

Address of CCDF Administrator: 750 N State Street, Jackson, MS 39202

Phone Number: 601-359-4888

E-Mail Address: cathy.sykes@mdhs.ms.gov

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

Name of CCDF Co-Administrator: Marianna Chauvin

Title of CCDF Co-Administrator: Policy Director, Division of Early Childhood Care and Development, Mississippi Department of Human Services

Phone Number: 601-359-4551

E-Mail Address: marianna.chauvin@mdhs.ms.gov

Description of the role of the Co-Administrator:

Provides support to the Administrator regarding policy, compliance with federal requirements, the state plan, collaboration with partners, state representation at regional and federal meetings, and general administration of the CCDF program.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): 1-800-877-7882

Web Address for CCDF program (for the public) (if any): www.mdhs.ms.gov/early-childhood-care-development/

Web Address for CCDF program policy manual (if any): www.mdhs.ms.gov/early-childhood-care-development/child-care-policy-manual/

Web Address for CCDF program administrative rules (if any): www.mdhs.ms.gov/early-childhood-care-development/child-care-policy-manual/

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF administration and the name of the lead contact responsible for managing this portion of the Plan.

Outreach and Consumer Education (section 2)

Agency/Department/Entity Mississippi Department of Human Services

Name of Lead Contact Cathy Sykes

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity Mississippi Department of Human Services

Name of Lead Contact Cathy Sykes

Licensing/Monitoring (section 5)

Agency/Department/Entity Mississippi State Department of Health Division of Child Care Licensure (licensed centers); Mississippi Department of Human Services DECCD Monitoring Unit (license-exempt providers)

Name of Lead Contact Vickey Berryman (MSDH Division of Child Care Licensure; Cathy Sykes (DECCD Monitoring Unit)

Child Care Workforce (section 6)

Agency/Department/Entity Mississippi Department of Human Services

Name of Lead Contact Cathy Sykes

Quality Improvement (section 7)

Agency/Department/Entity Mississippi Department of Human Services

Name of Lead Contact Cathy Sykes

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity MDHS Division of Program Integrity

Name of Lead Contact Laura Griffin

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 other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

- [x] All program rules and policies are set or established at the State/Territory level.
- [ ] Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
  - [ ] Eligibility rules and policies (e.g., income limits) are set by the:
    - [ ] State/Territory
    - [ ] County.

      If checked, describe the type of eligibility policies the county can set

    - [ ] Other local entity (e.g., workforce boards, early learning coalitions).

      If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set

    - [ ] Other.

      Describe:

  - [ ] Sliding fee scale is set by the:
    - [ ] State/Territory
    - [ ] County

      If checked, describe the type of sliding fee scale policies the county can set

    - [ ] Other local entity (e.g., workforce boards, early learning coalitions).

      If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

    - [ ] Other.

Describe:

☐ Payment rates are set by the:

☐ State/Territory

☐ County.

If checked, describe the type of payment rate policies the county can set

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set

☐ Other.

Describe:

☐ Other.

List and describe (e.g., quality improvement systems, payment practices):

1.2.2 How is the CCDF program operated in your State/Territory?

In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family burden and confusion. Check all that apply. and describe the services performed by the entity and how the State/Territory ensures accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

☑ CCDF Lead Agency

☑ TANF agency

Describe.

The TANF agency is the Division of Field Operations within the Lead Agency, which is the Mississippi Department of Human Services, (MDHS). TANF clients are directly

referred by caseworkers for child care subsidies (both TANF and Transitional Child Care). Eligibility for the Child Care Payment Program (CCPP) is determined by the TANF caseworker. Participants must comply with all requirements of the TANF program in order to remain eligible. Caseworkers review the Parent Statement of Agreement with all clients.

☑ Other State/Territory agency.

Describe.

The MS Department of Child Protection Services determines eligibility for children in Foster and Protective Services. These clients are served without regard to income and are assessed a minimum copay of $10. These clients are directly referred by caseworkers who review the Parent Statement of Agreement with all clients.

☐ Local government agencies such as county welfare or social services departments

Describe.

☐ Child care resource and referral agencies

Describe.

☑ Community-based organizations

Describe.

Homeless agencies, which are approved by MDHS Division of Early Childhood Care and Development (DECCD), directly refer clients for childcare subsidies. The condition of homelessness is the basis for eligibility. Referral agents are trained by DECCD and are required to review the Parent Statement of Agreement with all clients. The McKinney Vento Liaisons in local education agencies (LEAs) will also issue referrals for homeless clients.

☐ Other.

Describe.

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

☑ CCDF Lead Agency

☐ TANF agency

Describe.

☐ Other State/Territory agency.

Describe.

☐ Local government agencies such as county welfare or social services departments

Describe.

☑ Child care resource and referral agencies

Describe.

There are 18 CCR&R sites across the state staffed with early child care professionals who can provide parents with consumer education materials and assist parents with locating a child care provider that fits their needs. The Lead Agency also has an online search tool which enables parents and the general public to locate subsidy-approved providers based on a variety of search criteria including location, provider type, care type, and quality rating (if applicable).

☐ Community-based organizations

Describe.

☐ Other.

Describe.

c) Who issues payments?

☑ CCDF Lead Agency

☐ TANF agency

Describe.

☐ Other State/Territory agency.

Describe.

☐ Local government agencies such as county welfare or social services departments

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

1.3 Consultation in the Development of the State Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government. (658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:

DECCD hosted a series of interactive webinars while in the process of drafting the State Plan. Stakeholders from across the state were invited to attend and provide feedback during the writing process. These webinars were attended by a diverse group of providers, other state agency staff, and representatives from the non-profit and advocacy sector. Once the draft was complete, it was available for public viewing on the MDHS website, and stakeholders were invited to submit public comments and recommendations. DECCD established an online web form where stakeholders could submit a public comment at any time through February 25, 2016.

☑ [REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe:

The Lead Agency hosted a series of interactive webinars while in the process of drafting the State Plan. Stakeholders from across the state were invited to attend and provide feedback during the writing process. Once the draft was complete, stakeholders were sent the link to the State Plan document and were asked for public comment and recommendations. DECCD established an online web form where stakeholders could submit a public comment at any time through February 25, 2016. The Lead Agency additionally made presentations to the State Early Childhood Advisory Council (SECAC) and the SECAC's Professional Development Committee regarding upcoming policy changes.

If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

☑ Yes,

☐ No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy

☑ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes.

Describe, including which Tribe(s) you consulted with

The Mississippi Band of Choctaw Indians is represented on the SECAC. The Lead Agency invited representatives of the MS Band of Choctaw Indians to participate in a series of webinars held during the process of drafting the State Plan. Once the draft was complete, it was available for public viewing on the MDHS website and stakeholders, including the Band of Choctaw Indians, were invited to submit public comment and recommendations. Indian Tribes receive direct communication from Mississippi Department of Human Services about all public hearings, webinars, consultation information, and document postings to the MDHS website. MDHS established an online web-form where stakeholders and the general public could submit comment at any time through February 25, 2016. The online web-form was launched on December 1, 2015, and was live the entire time the State Plan application was initially drafted.

☐ Check N/A if no Indian Tribes and/or Tribal organizations in the State

☐ State/Territory agency responsible for public education.

Describe:

☐ State agency/agencies 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 Section 619 for preschool).

Describe:

☐ State/Territory institutions for higher education, including community colleges.

Describe:

☑ State/Territory agency responsible for child care licensing.

Describe:

The Lead Agency consulted with the Division of Childcare Licensure at the Mississippi State Department of Health throughout the development of the State Plan, specifically regarding sections relating to licensure. This consultation is ongoing.

☐ State/Territory office/director for Head Start State collaboration

Describe:

☐ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.

Describe:

☐ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).
Describe:

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention
Describe:

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

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

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).
Describe:

☑ McKinney-Vento State coordinators for Homeless Education.
Describe:
The Lead Agency consulted with the McKinney-Vento State coordinator (at the Mississippi Department of Education) throughout plan development. The McKinney-Vento State coordinator provided input regarding the expansion of childcare subsidies to the homeless population and increasing outreach to this population. The Lead Agency and the McKinney-Vento State coordinator continue to collaborate with the goal of utilizing McKinney-Vento Liaisons, which are located at each local education agency (LEA) across the state, as referral agents for childcare and expanding the mission of the McKinney Vento State coordinator at MDE. Initial meetings with the McKinney-Vento State coordinator were held October 2015 and January 2016; however, consultation is ongoing.

☑ State/Territory agency responsible for public health.

Describe:

The Lead Agency consulted with the Division of Childcare Licensure at the Mississippi State Department of Health throughout the development of the State Plan, specifically regarding sections relating to licensure. This consultation is ongoing.

☐ State/Territory agency responsible for mental health.

Describe:

☑ State/Territory agency responsible for child welfare.

Describe:

The Lead Agency consulted with the Department of Child Protection Services throughout the development of the Plan. The Department of Child Protection Services has served as the child welfare entity in the state. The Lead Agency coordinated with the Department to establish definitions regarding what constitutes childcare services and protective services. Consultation with the Department of Child Protection Services in regard to 12-month eligibility is ongoing. It should be noted that the Department of Child Protection Services is in the process of transitioning to a stand-alone Department (previously known as the Division of Family and Children Services within the Lead Agency).

☐ State/Territory liaison for military child care programs.

Describe:

☐ State/Territory agency responsible for employment services/workforce development.

Describe:

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

The Temporary Assistance for Needy Families (TANF) program is housed within the Lead Agency, under the same supervisor as the DEECD. The Director of DEECD and the program manager of TANF work closely on a daily basis. Program representatives were involved throughout plan development and completed sections of the plan related

to their programs. Experts on TANF were actively engaged in the writing.

☐ State/community agencies serving refugee or immigrant families.

Describe:

☑ Child care resource and referral agencies.

Describe:

MDHS currently has a contract with the Early Years Network, which is a unit at Mississippi State University. Under this contract, the Early Years Network provides administrative and managerial support to 18 CCR&R locations throughout the state. The Lead Agency maintains oversight over the EYN and is in direct contact with the project manager of the CCR&R network. Together, the Lead Agency and project manager completed sections of the plan related to the CCR&R network as well as quality initiatives.

☑ Provider groups or associations.

Describe:

The Lead Agency hosted a series of interactive webinars while in the process of drafting the State Plan. Stakeholders from across the state were invited to attend and provide feedback during the writing process. Once the draft was complete, it was available for public viewing on the MDHS website, and stakeholders were invited to submit public comment and recommendations. The Lead Agency established an online web-form where stakeholders could submit a public comment at any time through February 25, 2016. Documentation of all feedback received is published on the Lead Agency website.

☐ Worker organizations.

Describe:

☐ Parent groups or organizations.

Describe:

☐ Other.

Describe:

1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the

public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 01/29/2016

Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.

The State tour of public hearings (which were informal in nature and intended to capture feedback during the writing process) took place the first week of February 2016. The dates and locations were as follows: MS Gulf Coast on 2/2/16, MS Delta on 2/3/16, Northeast MS on 2/4/16, Northwest MS on 2/4/16, and Central MS on 2/5/16. The schedule for the public hearing tour was posted on the Lead Agency website in December of 2015 and was also advertised during the Lead Agency's State Plan webinar series, which ran from December 2015 through mid-January 2016. The final public hearing (which was formal in nature, governed by rules, and captured by a court reporter) was held on February 19, 2016. The notice of this hearing was posted on the Lead Agency website, and a link was sent to all subsidy parents, providers, and stakeholders via email on January 29, 2016. All information regarding the State Plan and the public hearings was posted to the following web page: http://www.mdhs.ms.gov/early-childhood-care-development/child-care-resources/ccdf-state-plan/.

c) Date(s) of public hearing(s): 02/19/2016

Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed The final public hearing on February 19 was held at the Madison County Extension Office. Prior to this hearing, DECCD hosted a series of informal public hearings throughout the state, including at MS Gulf Coast on 2/2/16, MS Delta on 2/3/16, Northeast MS on 2/4/16, Northwest MS on 2/4/16, and Central MS on 2/5/16.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) A draft of the State Plan was available on the MDHS website a week prior to the public hearing tour. An updated draft of the State Plan was available on the MDHS website a week prior to the final public hearing.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All comments received from the public were compiled and reviewed by the State Administrator and posted on the MDHS website: http://www.mdhs.ms.gov/early-childhood-care-development/child-care-resources/ccdf-state-plan/. Comments found to support the strengthening of the plan were incorporated where possible.

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.

☑ Working with advisory committees.

Describe:

The Lead Agency (MDHS) is a voting member on the State Early Childhood Advisory Council (SECAC), which has been granted authority by the Governor for coordinating services and programs for the state's early childhood community. The SECAC also has voting representation from the federally funded childhood programs, state-funded programs, and direct services providers. This 28-member council convenes voting members on a monthly basis and will be involved in the planning and implementation described in this document.

The SECAC has instituted a committee-based format around each of the state's focus areas for coordinating early childhood: 1) early learning and development, 2) health, mental health, and nutrition, and 3) family support. The committees will be responsible for coordinating efforts in the state over the next three years, including the efforts funded by CCDF. MDHS will continue to consult the council regarding State Plan activities.

☐ Working with child care resource and referral agencies.

Describe:

☐ Providing translation in other languages.

Describe:

☑ Making available on the Lead Agency website.

List the website:

http://www.mdhs.ms.gov/early-childhood-care-development/child-care-resources/ccdf-state-plan/

☐ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

☑ Providing notification to stakeholders (e.g., provider groups, parent groups).

Describe:

Stakeholders, including provider groups, were asked to participate in a series of webinars that the Lead Agency conducted during the writing process of the State Plan. These webinars covered each section of the State Plan. Participants were given the opportunity to provide feedback during the writing process. The general public, including parents and providers, are invited to each SECAC meeting. The general public may speak at these meetings and follow the progress of the Council and MDHS in planning and implementation activities.

☐ Other.

Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/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.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

Please describe 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 quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

☑ [REQUIRED] Programs operating at the Federal, State and local levels for children in pre-school programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.).

Describe:

The Lead Agency (MDHS) is a voting member on the State Early Childhood Advisory Council (SECAC), which has been granted authority by the Governor for coordinating services and programs for the state's early childhood community. The SECAC also has voting representation from the federally funded childhood programs, state-funded programs, and direct services providers. This 28-member council convenes voting members on a monthly basis and will be involved in the planning and implementation described in this document.

The SECAC has instituted a committee-based format around each of the state's focus areas for coordinating early childhood: 1) early learning and development, 2) health, mental health, and nutrition, and 3) family support. The committees will be responsible for coordinating efforts in the state over the next three years, including the efforts funded by CCDF. MDHS will continue to consult the council regarding State Plan activities.

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

Included as a voting member on SECAC is the Director of Early Childhood Education for the Mississippi Band of Choctaw Indians. Per SECAC legislation, this organization has a designated permanent voting position on SECAC. Beyond a voting role, this organization also is represented on the committee work conducted by SECAC, which specifies how organizations will coordinate, support the development of recommendation briefings, and

guide the process for all SECAC research and policy recommendations.

☐ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

☑ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.

Describe:

Through SECAC, required voting members include several direct childcare providers as well as early childcare organization leads that advocate, serve, and work on behalf of programs serving infants and toddlers with disabilities. SECAC members include the Part C and 619 Coordinator of programs under the Individuals with Disabilities Act (IDEA), and the executive directors of the Department of Mental Health, Medicaid, and Education. All of these parties coordinate within SECAC to develop recommendations and planning.

☑ [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act).

Describe:

The Lead Agency is a voting member on the SECAC, which has been granted authority by the Governor for coordinating services and programs for the state's early childhood community. The SECAC also has voting representation from the federally funded childhood programs, including those prescribed under the McKinney-Vento Homeless Education Act (Mississippi Department of Education). All of these parties coordinate within SECAC to develop recommendations and planning.

☑ [REQUIRED] Early childhood programs serving children in foster care.

Describe:

Foster care in Mississippi is provided and administered by the MS Department of Child Protection Services. The executive director for the Department of Child Protection Services is currently appointed to a voting position on the SECAC and will be instrumental in developing policy recommendations for the Governor on improving the coordination and implementation of early childhood initiatives. MDHS will coordinate with the Department of Child Protection Services through their joint appointment to the SECAC. Coordination between MDHS and the Department of Child Protection Services is ongoing as caseworkers serve as referral agents for the child care program.

☑ State/Territory agency responsible for child care licensing.

Describe:

The Mississippi State Department of Health, the lead agency for public health that houses the Division of Child Care Licensure, will coordinate with MDHS and other entities through their appointment to the SECAC. Both state agency leads are voting members and actively involved on the SECAC. The Lead Agency coordinates with MS State Department of Health for licensing requirements, sharing information thorough data systems regarding licensure status, background checks, and the health and safety of children in child care settings.

☑ State/Territory agency with Head Start State collaboration grant.

Describe:

Both the Director of the Mississippi Head Start Collaboration Office as well as the Executive Director of the Mississippi Head Start Association are voting members on the SECAC. Similarly, the Governor has appointed the Executive Director of a Head Start child care center to also be a voting member. The Head Start State Collaboration grant currently resides in the Office of the Governor, which is the same office that houses the SECAC. The Executive Director of SECAC and the Executive Director of the Head Start State Collaboration Office work closely together to accomplish the goals of the SECAC. The goals of such coordination are to increase access to Head Start programs, increase the quality of services provided to children and families enrolled in Head Start centers, and effectively link Head Start children and families to the services available to them.

☑ State Advisory Council authorized by the Head Start Act.

Describe:

In January 2016, Governor Bryant designated the SECAC as the lead coordinating organization to support, coordinate, and integrate the MDHS State Plan with the state's larger early childhood coordination goals. The SECAC will not just act as a monthly "town hall" for the state. It has and will continue to provide actionable reports, surveys, or other research efforts to improve communication and understanding in the state. In the last 12 months, SECAC has conducted a study for all licensed daycare centers in the state on their use of and feedback on state early childhood standards. SECAC has also conducted an 8-city town hall on the use of the state's QRIS. SECAC is committed to gathering information, using data to understand the relevancy and frequency, and providing all relevant materials to SECAC members to help inform the policy recommendations made to the Governor. MDHS is a voting member of the SECAC and, over the next three years, will coordinate planning and implementation of State Plan activities through the SECAC.

☐ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants.
Describe:

☑ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons
Describe:
The McKinney-Vento State coordinator for Homeless Education is housed in the Mississippi Department of Education (MDE). MDE is a voting member on SECAC. The state agency lead for MDE is actively involved with SECAC coordination and has been instrumental with developing policy recommendations for the Governor on improving the coordination and implementation of early childhood initiatives. Moving forward, SECAC will call on the McKinney-Vento State coordinator to serve on subcommittees or to present to the Council as a subject-matter expert.
The Lead Agency continues to coordinate with the McKinney-Vento State coordinator for Homeless Education to expand access to child care services and to provide training to child care providers.

☑ Child care resource and referral agencies.
Describe:
The Lead Agency provides funds to create a statewide network that assists families in locating and enrolling in early childhood programs. Through these services, families are also provided access to data relating to the quality rated programs that meet the needs of the family. Parents and providers may also find educational materials, toys, and activity resources to promote the provision of high quality care and education to Mississippi's young children.

☑ State/Territory agency responsible for public education.
Describe:
The Mississippi Department of Education (MDE) is represented by two voting members on the SECAC. The lead agency shall negotiate State Plan activities through the SECAC, including the expansion of Homeless Education and the Child and Adult Food Care Program, which are both currently housed in MDE. Examples of other ongoing initiatives include expanding professional development to private providers and establishing statewide Early

Learning Guidelines (ELGs) and training related to ELGs. Statewide ELGs and the training related to them are designed to apply to public and private providers, and CCDF providers are encouraged to yield to the recommendations implied by age-specific ELGs for young children. MDE is currently expanding early education opportunities in the state in three ways: through public-private partnerships, through Title 1 grants to LEAs, and through the management and distribution of private donor funds. MDHS and MDE work especially close in the first-opportunity, public-private partnerships. The Early Learning Collaborative Act of 2013 authorized the use of public funds to support early learning "Collaboratives" to expand the number of public pre-kindergarten classrooms. A collaborative is constituted by a public school district, Head Start centers, private care facilities, and non-profit organizations. These entities must coordinate resources and professional development opportunities, they must adopt a curriculum and assessments that align with ELGs, and they must organize themselves to maintain compliance and accountability to the State. Many of the private child care providers who are involved in a Collaborative are CCDF providers. MDHS and MDE regularly share information and communicate regarding administrative tasks to support the young children and families who are involved in human services programs.

☑ State/Territory institutions for higher education, including community colleges.

Describe:

Included as a voting member on the SECAC is the representative of the Mississippi Institutions of Higher Education. SECAC is currently in the process of updating articulation agreements between two- and four-year institutions to streamline the process of transferring Early Childhood Education credits between institutions. Over the last two years a SECAC committee met regularly to address articulation agreements specifically. The Lead Agency has been a pivotal contributor to this process. The SECAC committee completed a 50-state scan of articulation agreements, ultimately deciding to model the Mississippi program on the Texas model. Implementation of Articulation Agreements between Institutions of Higher Learning related to early childhood credentials is ongoing and will continue to be facilitated by the SECAC with close consultation with the Lead Agency.

MDHS contracts with the Early Years Network to provide enhanced quality for the early childhood workforce. The Early Years Network has a strong partnership with community colleges in the state of Mississippi. One of the main components leading to this partnership is the existence of career and technical programs at the community college level. Students

attending these colleges have the opportunity to use all of the resources provided by the Early Years Network in their Resource and Referral site for class or work-related situations, however the materials have proven to be most beneficial for those in early care and education programs. Currently, the EYN has Resource and Referral sites in eight of the community colleges across the state. This partnership enables the EYN a location to house the materials that are available for free checkout to parents, providers, and anyone else that would benefit from using the educational materials at the site. Along with an area for the educational materials, the community college campuses provide office space for EYN staff members at no cost. Amenities such as utilities, internet, and phone are included in the agreement. Training rooms are also provided so that EYN staff members have a space to conduct early child care and education trainings.

☑ State/Territory agency responsible for Child and Adult Care Food Program (CACFP).
Describe:
The CACFP is administratively housed in the Mississippi Department of Education (MDE). MDE is a voting member of the SECAC. MDHS and MDE work together through SECAC to develop strategies to increase provider enrollment in the CACFP. A strategy currently being used involves enrollment during technical assistance, which is provided by the Lead Agency. When providing technical assistance to providers, MDHS asks providers whether or not they are enrolled in CACFP. If a provider is not enrolled, MDHS provides information and encourages program enrollment.

☐ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention.
Describe:

☑ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services.

Describe:

Coordination will be achieved through the Lead Agency's participation in the MS Dept of Health's Expanding Opportunities Initiative. The Lead Agency is working to increase the number of quality inclusive learning environments for children with special needs.

The Lead Agency coordinates with other federal, state, local and/or private agencies through its participation in the MS Dept. of Health's Expanding Opportunities Initiative. The Lead Agency is working to increase the number of quality inclusive learning environments for children with special needs.

☑ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.

Describe:

The program is currently administered through the Mississippi Department of Human Services and is referred to as Healthy Homes Mississippi (HHM). MDHS will continue to implement this program through close coordination with LEAs, county health departments, county DHS offices, local law enforcement, and local government. HHM caseworkers serve as referral agents for the child care program.

☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

☑ State/Territory agency responsible for public health.

Describe:

The Mississippi State Department of Health, the lead agency for public health, will coordinate with MDHS and other entities through their appointment to the SECAC. Both state agency leads are voting members and actively involved on the SECAC. MDHS coordinates with MSDH on licensing requirements, sharing information thorough data systems regarding licensure status, background checks, and the health and safety of children in child care settings.

☐ State/Territory agency responsible for mental health.

Describe:

☑ State/Territory agency responsible for child welfare.

Describe:

The Department of Child Protection Services is responsible for child welfare in Mississippi. The Director of the Department of Child Protection Services currently has a voting position on the SECAC. Through SECAC, the Lead Agency will facilitate coordination between the Lead Agency and the Department of Child Protection Services.

Priority for services in the subsidy program is given to Foster and Protective Services clients, who are served through referral.

☐ State/Territory liaison for military child care programs.

Describe:

☑ State/Territory agency responsible for employment services/workforce development.

Describe:

The agency responsible for employment services and workforce development in Mississippi is the Mississippi Department of Employment Security (MDES). This agency is advised by the State Workforce Investment Board (SWIB). The executive director of the SECAC sits on the SWIB and will encourage MDHS and other SECAC parties to contribute to SWIB through SECAC's representation on the advisory council to MDES.

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

TANF in Mississippi is administered by the Division of Field Operations. The SECAC will facilitate this coordination by calling on representatives from the DFO to serve on subcommittees or inviting representatives to present to the Council as subject-matter experts if expertise above and beyond the agency lead is required.

The Lead Agency will ensure collaboration between the Division of Early Childhood Care and

Development and the Division of Field Operations to ensure continuity of care for this population. TANF clients are a priority population served upon referral.

☐ State/Territory community agencies serving refugee or immigrant families

Describe:

☑ Provider groups or associations.

Describe:

SECAC continues to require provider groups and associations, as well as child care providers, to be voting members on SECAC. This leadership role has been a continued focus and will be integral to soliciting feedback, designing and implementing the state coordination plan, and ensuring the voice of providers is directly integrated. Of the 28 voting members of SECAC, seven members are teachers (2), childcare directors (2), or representatives of member associations (3). All committees that are established have an equal distribution of providers or associations representing providers to ensure this critical voice is part of all SECAC policy recommendations.

☐ Worker organizations.

Describe:

☐ Parent groups or organizations.

Describe:

☑ Other.

Describe:

MDHS currently partners with the Mississippi Head Start Association (MHSA), which is the professional support organization for Head Start and Early Head Start programs in the State. The MSHA provides professional development opportunities for Head Start providers, and through MSHA's relationship with MDHS, these professional development opportunities are open to private providers. MDHS is also involved in the development of the annual MHSA conference. This annual conference for providers is a critical mass of information and resources for Head Start and other care environment providers.

MDHS has relationships with a number of other entities in the state that are providing

programs and services to young children and their families. These entities include Healthy Homes Mississippi, Save the Children, the Center for Child Development and the Institute for Disability Studies at the University of Southern Mississippi, the Center for Educational Research and Evaluation at the University of Mississippi, the Early Childhood Institute at Mississippi State University, and the Mississippi Center for Education Innovation. These programs provide technical assistance, professional development, research and data analysis services, and community outreach and engagement services. MDHS's relationship with these entities is facilitated by a contractual agreement with the Early Years Network (EYN). EYN is the fiscal and administrative agent for each of these entities. EYN and the entities it has consolidated are fiscally accountable to the Lead Agency.

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs 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, homeless children, 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 in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high 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 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 or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) 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 the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

☐ Yes, If yes, describe at a minimum:

How do you define "combine"

Which funds will you combine

Goal(s) of combining funds (why?) and expected outcomes, 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

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

How are the funds tracked and method of oversight

☑ No.

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (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 reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level - State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services.

1) The Lead Agency partners with the SECAC with the goal of coordinating efforts on early childhood for the state and leveraging available resources. SECAC is a 28 member voting council which provides opportunities for child care providers and directors to have equal participation with state agency leads. Many SECAC efforts in the last two years have been completed based on inter-agency partnerships from the SECAC such as a 1,600 provider survey on state early childhood standards, 8 city listening tour of the state's QRS, cross state policy research on early childhood governance, and other efforts.

2) The Lead Agency partners with the MS Head Start Association (a statewide organization) and the MS Department of Education to align strategies for service delivery and leverage professional development resources across all agencies with the goal of increasing access to professional development opportunities for all child care providers in the State.

3) The Lead Agency served on an inter-agency stakeholder group convened by the MS Department of Education to reach a common definition of both school readiness and quality early child care. The goal of this effort was to align goals for early childhood education with other entities in the state.

4) Within the Lead Agency's slot provider program (see section 4.1.3) there are several examples of public private partnership including sub-grants with the City of Vicksburg, the City of Jackson, Sanderson Farms (local business), Catholic Charities, Hancock County Human Resource Agency, and Jackson County Civic Action Agency. The goal of the slot program is to increase parental access to quality child care services. Slot contractors receive subsidies and quality improvement funds from the Lead Agency to provide direct services. Slot contractors are expected to leverage local match dollars in order to participate in the program.

5) The Lead Agency has partnered, through a shared services alliance, with a statewide program through the MS Center for Education Innovation which provides online access to resources for child care providers. The goal of this partnership is to increase provider access to low-cost resources by providing those resources in a readily available format.

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

States may use funds to support or establish Child Care Resource and Referral (CCR&R systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State/Territory
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

Nothing in statute prohibits States from using CCR&Ragencies to conduct or provide additional services beyond those required by statute above.

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

☑ Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4.

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

The Lead Agency has a contractual agreement (which is governed by the MDHS sub-grantee manual) to provide CCR&R services that support quality early care and education for Mississippi's children. The CCR&Rs provide cohesive education, outreach, and services based on research and best-practices in 18 CCR&R sites across the state. These agencies give parents and providers access to lending libraries and early child care professionals.

CCR&Rs provide the following services:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services in local areas or regions of the State/Territory and submit such information to the State
- Work to establish partnerships with public agencies and private entities, including faith- based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State
- As appropriate, coordinate their activities with the activities of the Lead Agency

☐ No. The State/Territory does not fund a CCR&R system and has no plans to establish.

Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state-designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State's Statewide Child Care Disaster Plan.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if

applicable

The Lead Agency has established guidelines for continuity of care following a disaster. The disaster plan is publicly viewable at http://www.mdhs.ms.gov/media/15509/eccd_emergencyplan.pdf.

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policies and strategies for unlicensed childcare providers regarding the filing of individualized plans and procedures to follow in the event of an emergency.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services (including the MDHS Emergency Management Coordinator)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC, Mississippi Emergency Management Association (MEMA), Division of Child Care Licensure, and Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies regarding the filing of provider emergency

preparedness plans. The Lead Agency will also draft an emergency plan template based on feedback from stakeholders. The Lead Agency will negotiate administrative approval from agency leadership for these policy strategies.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's office, the Lead Agency will submit proposed policies regarding provider emergency preparedness plans for a

period of public comment. A public hearing will be conducted during this time.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC member agencies will be encouraged to participate in and publicize the public comment process.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Lead Agency staff will be trained on new policies regarding provider emergency preparedness planning as well as procedures for implementation and compliance monitoring. Training will be conducted in person.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize policy changes regarding disaster preparedness planning. Information will be sent to unlicensed providers and relevant stakeholders via email. Information will be posted on the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Mississippi Emergency Management Agency (MEMA), Save the Children, and Early Years Network (EYN)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train unlicensed providers on new requirements regarding disaster preparedness planning. Training will be offered in a variety of formats including online videos and in-person trainings.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Emergency Management Agency (MEMA), Save the Children, Early Years Network (EYN), and Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement new requirements for unlicensed providers regarding child care emergency preparedness plans. The Lead Agency will establish a deadline for emergency preparedness plans to be completed. The Lead Agency will implement protocols to monitor unlicensed provider compliance with this requirement on an annual basis. The MS State Department of Health Division of Child Care Licensure will continue to monitor compliance within licensed centers.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policies and strategies for unlicensed childcare providers regarding policies and procedures for staff and volunteer emergency preparedness training and practice drills. Policy strategies will specify the regularity with which emergency drills should be conducted. Provider procedures for staff and volunteer training will be included in the provider's emergency preparedness plan.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services (specifically including the MDHS Emergency Management Coordinator)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC, MS Emergency Management Agency (MEMA, Division of Child Care Licensure, Early Years Network (EYN), and Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (to require providers to perform periodic training and practice drills) based on feedback from stakeholders and negotiate administrative approval from agency leadership for policy strategies.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC, MEMA, Division of Child Care Licensure, and Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding periodic emergency drills for unlicensed child care settings) to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding periodic emergency drills for unlicensed child care settings) for a period of public comment. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MDHS Emergency Management Coordinator, MEMA, EYN, Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Lead Agency staff will be trained on new policies (regarding periodic emergency drills for unlicensed child care settings) and procedures for implementation and compliance monitoring. Training will be conducted in person.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize policy changes regarding periodic emergency practice drills for unlicensed child care settings. Information will be sent to unlicensed providers and relevant stakeholders via email, and information will be posted on the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS

Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train unlicensed providers on new requirements regarding emergency practice drills. Training will be offered in a variety of formats including online videos and in-person trainings.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement new provider requirements regarding child care emergency practice drills. The Lead Agency will implement protocols to monitor provider compliance with this requirement on an annual basis. The MS Department of Health will continue to monitor compliance with this requirement in licensed care settings.

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. 1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
    - a) the availability of child care assistance,
    - b) the quality of child care providers (if available),
    - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
    - d) Individuals with Disabilities Education Act (IDEA) programs and services,
    - e) Research and best practices in child development, and
    - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
    - 2. Information related to the health and safety of children in child care settings. The

plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:

- a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
- b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
- c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A)), 658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.

a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

The Lead Agency has established subsidy referral partners for priority populations (including TANF/TCC/FCPS/HHM/homeless) that can be served even when a Pending Funding list is in effect, and these agencies are a key component of the Lead Agency's outreach efforts in regard to identifying potentially eligible families. Additionally, the Pending Funding list is a mechanism by which the Lead Agency can maintain a record of potentially eligible families who may be served once funding becomes available.

b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

Outreach efforts include 18 CCR&R locations. The Lead Agency also partners with referral

agencies (including TANF/Department of Child Protection Services/Healthy Homes Mississippi/homeless agencies), which are a vital component of our outreach efforts to potentially eligible families. The Lead Agency Call Center/Communications Unit also informs clients about the availability of funding for childcare subsidies.

c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?
General information about the subsidy program and the availability of funds for subsidy program is available on the Lead Agency website. MDHS has a contractual agreement with a network of partners (the Early Years Network, described later) who work on behalf of the lead agency, including operating a Facebook page.

2.1.2 How can parents apply for services? Check all that apply.

☑ Electronically via online application, mobile app or email.

Provide link https://www.apps.mdhs.ms.gov/ccis/NewApplication/AppStartPage.aspx. The State no longer accepts paper applications.

☐ In-person interview or orientation.

Describe agencies where these may occur:

☐ Phone

☐ Mail

☐ At the child care site

☑ At a child care resource and referral agency.

☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:

☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:

☑ Other strategies.

Describe:

Referred clients are not required to complete an application. Caseworkers or referral agents submit an online referral, and the Lead Agency will issue a certificate (subsidy) based on that referral.

2.2 Consumer Education Website

The CCDBG Act of 2014 added a purpose of the child care program "to promote involvement by parents and family members in the development of their children in child care settings." (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP) for which families may also qualify.
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity), and
- State/Territory policies regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children, in early childhood programs receiving child care assistance (CCDF).

☐ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

- Information on the full diversity of child care providers: http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/deccd-approved-providers/
- availability of child care assistance: http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/application-forms-for-parents/
- quality of child care programs: http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/deccd-approved-providers/

Unmet requirement - Identify the requirement(s) to be implemented State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children (which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement)) in early childhood programs receiving CCDF.)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine best practices related to the social/emotional/behavioral development and mental health of young children. The Lead Agency seeks to identify social/emotional/behavioral development resources for providers and to draft a position statement regarding the social/emotional/behavioral health of children and the expulsion of children in early childhood programs.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS Department of Mental Health; MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft a position paper regarding the social/emotional/behavioral development and mental health of young children and negotiate administrative approval among agency leadership at the MS Department of Human Services, the MS Department of Education, and the MS Department of Mental Health.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS Department of Mental Health; MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will distribute the position statement (regarding the social/emotional/behavioral health of young children and the expulsion of children in early childhood programs) and post the position statement on the consumer

education website.

Projected start date for each activity: 08/31/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; MS Department of Mental Health; MS Department of Education; Early Years Network

Unmet requirement - Identify the requirement(s) to be implemented Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify,

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with Stakeholders, via the SECAC to determine strategies to best inform consumers about other programs for which families may qualify.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will compile a list of services (for which families may also qualify) and provide contact information for each program. This information will be distributed to clients via an automated email that will be sent to every parent upon completion of the electronic application for child care.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 06/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Family Support Subcommittee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will add a list of resources (other programs for which families may qualify) to the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will distribute the resource list to all CCDF-funded child care providers using a variety of communication methods, including email and the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information (including other programs for which families may also qualify) as it is presented on the consumer education website to the SECAC and the general public. Feedback gathered will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Provider Organizations

Unmet requirement - Identify the requirement(s) to be implemented Individuals with Disabilities Education Act (IDEA) programs and services

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC (which includes representatives of IDEA programs and services), to determine strategies to best inform consumers about IDEA programs and services for which families may qualify.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 05/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee), MS Department of Health, MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will compile a resource list of IDEA programs and services and provide contact information for each program. This information will be distributed to clients via an automated email that will be sent to every parent upon completion of the electronic application for child care.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 06/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will distribute the resource list to all CCDF-funded child care providers using a variety of communication methods, including email and the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS Department of Health, MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will add information about IDEA programs and services to the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS Department of Health, MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information (specifically on IDEA programs and services) as it is presented on the consumer education website to the SECAC and the general public. Feedback gathered will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete

implementation of this activity

SECAC as well as comments from the general public

Unmet requirement - Identify the requirement(s) to be implemented Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine strategies to best inform consumers of research and best practices in child development.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 05/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee as well as the Early Care and Learning Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will add information to the consumer education website regarding best practices in child development, including all domains of early childhood development. The website will provide information for two target audiences: parents and providers. The Lead Agency will seek input from subject matter experts in early childhood development in order to ensure that the site is updated on a regular basis.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Early Years Network

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information (specifically research and best practices in child development) as it is presented on the consumer education website to the SECAC (for a formal review) and the general public (for informal comments regarding the site). Feedback gathered will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Early Years Network

2.2.2 Describe how the State/Territory makes information availabe about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency has an online search tool where interested parties can search for information regarding subsidy-approved providers including location, provider type, care

type, and quality rating (if applicable).

Online Search Tool for subsidy-approved providers: http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/deccd-approved-providers/

The MS State Department of Health also has a search tool where interested parties can search for information regarding all licensed centers in the state.

Online Search Tool for all licensed centers (both subsidy and non-subsidy): http://msdh.ms.gov/msdhsite/_static/30,332,183,438.html

Additionally, any provider or parents or member of the general public can utilize one of the 18 CCR&R locations in the state. These locations are staffed by individuals who are knowledgeable of the early care and education landscape in Mississippi and can help anyone find care and/or services for young children.

Additionally, the SECAC regularly provides reports and issue briefs on early childhood issues in the state.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

- Brochures are available on the Lead Agency website to guide parents to identify quality childcare. These brochures rely heavily on photos and contain a minimum amount of words for readability for parents with low literacy levels. Additionally, these brochures are available in Spanish on the Lead Agency website. These brochures are available at Lead Agency county offices, CCR&R sites, and Head Start programs across the state.
- The Lead Agency has an in-house call center/communications unit which can provide basic information about the program as well as information about how to obtain additional resources available through the Lead Agency or other relevant agency or partner. The Lead Agency can provide Spanish bilingual staff members to callers.

c) Describe who you partner with to make information about the full diversity of child care choices available

Our referral partners (including TANF, Department of Child Protection Services, and homeless agencies) play a vital role in informing parents about the child care services available to them. Additionally, the 18 CCR&R locations in the state are staffed by individuals

who are knowledgeable of the early care and education landscape in Mississippi and can help anyone find care and/or services for young children.

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly strategies such as messages that are designed to engage intended audiences and are easy to understand

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

INFORMATION FOR PARENTS

The Lead Agency has an online search tool that enables parents to search for DECCD-approved providers who participate in the Quality Stars program. This information is offered in both Spanish and Vietnamese. Parents can search for providers in their area based on several search criteria, including quality rating. The online search tool can be seen here: http://www.mdhs.ms.gov/early-childhood-care-development/for- parents/deccd-approved-providers/.

Information regarding provider quality is available on the Quality Stars website. Brochures are also available online and at CCR&R sites.

The Lead Agency website also has links to best practices as described on third-party sites such as the Center for Disease Control and Prevention and the Institute for Disability Studies.

The website is currently translated to Spanish and Vietnamese. These are the two largest populations of non-English speakers in Mississippi. MDHS also maintains contacts at the University of Mississippi and the University of Southern Mississippi should an additional translation need arise.

INFORMATION FOR THE GENERAL PUBLIC

Quality Stars Website: http://earlychildhood.msstate.edu/programs/qualitystars/

Online Search Tool for Local Quality Rated Programs: http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/deccd-approved-providers/

The website is currently translated to Spanish and Vietnamese. These are the two largest populations of non-English speakers in Mississippi. MDHS also maintains contacts at the University of Mississippi and the University of Southern Mississippi should an additional translation need arise.

INFORMATION FOR PROVIDERS

Recruitment is a key component of Mississippi's Quality Stars - QRIS. Throughout the state several opportunities are available for non-participating centers to learn more about the program. Recruitment efforts for Quality Stars - QRIS are implemented through there different outreach efforts:

1. Twice a year (July and December), all non-enrolled centers (pulled from the licensure list) are sent recruitment letters to briefly overview the program, introduce the Quality Stars staff, and hopefully pique their interest in QRIS.
2. Recruitment and Enrollment (R&E) meetings are held yearly throughout the state to include all counties and invite all non-participating programs. Postcard invitations to attend R&E meetings are sent to all non-participating centers from the licensure list. At the meetings all participants are given a packet that includes a QRIS brochure, Quality Stars Program Report, monitoring overview, ITERS-R overview, ECERS-R overview, and Progress Report. A "5Points to a Successful Star" PowerPoint presentation is used when large groups are in attendance. Individual R&E meetings review the same information, just on a more one-on-one, personal delivery system (often without the PowerPoint). R&E meetings are held in public at convenient public locations (extension offices, child care facilities, local churches, libraries, etc.) or individual early care and education facilities and/or are aligned with statewide professional development trainings offered throughout the state.
3. All non-participating centers are contacted by a QRIS Specialist by phone multiple times throughout the year and receive a visit at the center to drop off an R&E packet at least once a year. R&E packets include a QRIS brochure, star pen, and a Quality Stars Program Report.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

The Lead Agency provides written communication through our email system. Brochures (in Spanish and English) are available on the Lead Agency website as well as at the CCR&R sites. Information that is available on the Lead Agency website is available in Spanish and Vietnamese (please note that uploaded documents may not be translated).

c) Describe who you partner with to make information about child care quality available

MDHS partners with 18 CCR&R agencies, and with SECAC, and all of the entities represented by SECAC.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

a) Temporary Assistance for Needy Families (TANF)

After completing the online application for childcare subsidies, eligible parents are informed via email about TANF services. Information related to TANF is also available on the MDHS website. Eligible parents without access to internet can obtain printed information about TANF services from the Mississippi Department of Human Services (MDHS) county offices or through Child Care Resource and Referral (CCR&Rs) offices. Information available to eligible families includes: TANF Fact Sheet; TANF brochure; Income, Resource & Benefit Guidelines, Applicant and Recipient information; TANF Work Program information; and

Mississippi Debit MasterCard Program information. This information is available electronically through the MDHS website and as printed material (brochures, fact sheets, etc.).

b) Head Start and Early Head Start Programs

After completing the online application for childcare subsidies, parents are informed via email of the diversity of child care services available in the state, including Head Start and Early Head Start. Information related to Head Start is on a number of websites, including the MDHS website, the national Head Start website, and the Mississippi Head Start Association website. Consumers without access to email/internet can obtain printed information about Head Start and Early Head Start from Child Care Resource and Referral (CCR&Rs) offices.

c) Low Income Home Energy Assistance Program (LIHEAP)

After completing the online application for childcare subsidies, parents are informed via email of other human service programs for which they may be eligible to receive, including LIHEAP. Information related to LIHEAP is also available on the MDHS website. Consumers without access to email/internet can obtain printed information about LIHEAP from Child Care Resource and Referral (CCR&Rs) offices.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

The SNAP program is housed within the MDHS. After completing the online application for childcare subsidies, eligible parents are informed via email about SNAP services.Information related to SNAP is also available on the MDHS website. Eligible parents with no internet access can obtain printed information about SNAP services from MDHS county offices or through Child Care Resource and Referral (CCR&R) offices. Information available to eligible parents includes a brochure of general SNAP information; SNAP pre-screening information; SNAP employment and training information; and program contactinformation.

e) Women, Infants, and Children Program (WIC)

After completing the online application for childcare subsidies, eligible parents are informed via email about WIC services. WIC-related information is available online through the MSDH website. Eligible families without access to internet can obtain this information through Child Care Resource and Referral (CCR&R) offices.

Information provided to eligible families includes the following: WIC income table; keeping your baby smoke-free; Smart Snacks; Strong as Iron; WIC and Happy Active Child; WIC and Happy Healthy Baby; WIC and Healthy First Teeth; Thinking About Breastfeeding (English and Spanish); Breastfeeding Basics (English and Spanish); Weight to Height charts; Weight to Age charts; BMI charts; length charts; head circumference charts; information about accessing online nutrition education; and the WIC improvement survey.

f) Child and Adult Care Food Program(CACFP)

Information about the CACFP is provided through the Mississippi Department of Education (MDE). After completing the online application for childcare subsidy, eligible parents are informed via email about CACFP services. This information is also available online through the MDE website. Eligible families without internet access can obtain CACFP information in print form through Child Care Resource and Referral (CCR&R) offices. Information available to eligible families include: Free and Reduced Meals Family Application Instructions; Free and Reduced Meals Family Application; Child Care Rates (meal rates); Income Eligibility Guidelines; Medical Statement for Non-Disabled Children; Medical Statement for Disabled Children; Religious Statement for Child/Children; CACFP Meal Applications; and program contact information.

g) Medicaid

MDHS works with the Mississippi Division of Medicaid to provide Medicaid-related information to eligible families. After completing the online application for childcare subsidies, eligible parents are informed via email about Medicaid services. This information is also available electronically (via the Mississippi Division of Medicaid website) and in print through Child Care Resource and Referral (CCR&R). Resources provided to eligible families include information related to the following: Medicaid; Early and Periodic Screening, Diagnosis, and Treatment (EPSDT); MississippiCAN; CHIP; Mississippi Health Benefits for Children; Managed Care; Mississippi Medicaid Application Form; and Eligibility Information & Income Limits tables.

h) Children's Health Insurance Program (CHIP)

Service delivery related to the Children's Health Insurance Program (CHIP) is provided by the Mississippi State Department of Health (MSDH). The Mississippi Division of Medicaid is the fiscal agent for this program and facilitates case management related to CHIP. MDHS works with the Mississippi Division of Medicaid and the Mississippi State Department of Health to provide eligible parents with information related to CHIP. After completing the online application for childcare subsidies, eligible parents are informed via email about CHIP services. This information is also available electronically (via the Mississippi Division of Medicaid and MSDH websites) as well as in print form through Child Care Resource and Referral (CCR&R) offices. Provided information includes Mississippi Medicaid Application Form (the same application is used for CHIP and regular Medicaid) and CHIP eligibility information.

i) Individuals with Disabilities Education Act (IDEA)

After completing the online application for childcare subsidies, parents are informed via email of other human service programs for which they may be eligible, including services related to IDEA. This information is also available on the MDHS website. Consumers without access to internet can obtain printed information about IDEA programs and services from the Mississippi Department of Human Services (MDHS) county offices or through Child Care Resource and Referral (CCR&Rs) offices.

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten)

This information is emailed to parents when they complete the online application for childcare subsidy (in the form of a list of other human service programs for which they may be eligible).

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting

program)

This information is emailed to parents when they complete the online application for childcare subsidy (in the form of a list of other human service programs for which they may be eligible). Brochures on the Healthy Homes Mississippi Program are available at CCR&Rs.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.

For example, does the State/Territory provide information to providers through CCR&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

b) Head Start and Early Head Start Programs

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

c) Low Income Home Energy Assistance Program (LIHEAP)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

e) Women, Infants, and Children Program (WIC)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

f) Child and Adult Care Food Program(CACFP)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

g) Medicaid

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

h) Children's Health Insurance Program (CHIP)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

i) Individuals with Disabilities Education Act (IDEA)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

j) Other State/Federally Funded Child Care Programs (example-State Pre-K)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi.

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program)

Information is available through a contract with CCR&R locations, which are staffed by individuals who are knowledgeable of the early childhood care and education landscape in Mississippi. CCR&R sites also maintain a community resource guide of services that are specific to the surrounding area.

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency posts information on the Early Years Network website for parents providers and the general public related to child development and best practices for caregiving. The website has different tabs with information specific to parents and providers.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Subject matter experts continuously update research and best practices in child development on the Early Years Network website. Information is presented in a variety of formats including written materials and media. The information contained on the website includes information about developmental benchmarks, parenting and family supports, care strategies, information about health and wellness, cell phone apps for early childhood, etc. The content of the website will evolve based on updates from the field of research; and requests for information from parents, providers, and the general public.

c) Describe who you partner with to make information about research and best practices in child development available

MDHS partners with Mississippi State University Extension Service, the University of Southern Mississippi, and the University of Mississippi.

2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written

materials, direct communication, etc.) for each group:

i. Parents

Resources, specific to parents, are available at CCR&R Sites. Trainings, utilizing the Nurturing Parenting curriculum, are also offered.

ii. Providers

Resources, specific to providers, are available at CCR&R Sites. Social-emotional/behavioral curricula are built into several courses offered to providers inducluding the director's credential.

iii. General public

CCR&R sites maintain resource directories which are specific to the local community and include social-emotional/behavioral supports and mental health practitioners.

b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available

MDHS partners with the SECAC and all of the entities represented on the SECAC, including the Departments of Education and Mental Health, to ensure information is accurate and accessible to the general public.

c) Does the State have a written policy regarding preventing expulsion of:

Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes.

If yes, If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) 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.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

☐ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

List the Lead Agency policy citation(s) and:

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be

consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to identify existing resources and determine strategies to disseminate information to families and providers (specifically, a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children).

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 05/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); The Division of Medicaid, MSDH First Steps; and the MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will compile a list of existing resources and present the information in a user-friendly format (with targeted information for both parents and providers).

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will distribute the identified resources to families and child care providers through a variety of communication methods, including but not limited to agency websites, the consumer education website, printed material, email, and video. Information will be separately presented for two target audiences: parents and providers.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS State Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

Medicaid, MS Department of Health

Unmet requirement - Identify the requirement(s) to be implemented Establish procedures to provide information to families and providers (1) 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.);

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders (specifically SECAC, Mississippi State Department of Health, and the Mississippi Department of Education) to identify existing resources and determine a strategy to provide information to families and providers regarding EPSDT and IDEA Part C.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 05/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee), Division of Medicaid; MS State Department of Health First Steps Early Intervention Program; MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will compile information (regarding EPSDT and IDEA Part C) in a user-friendly format for the target audiences of parents and providers.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); Division of Medicaid; MS Department of Health First Steps Early Intervention Program; MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the SECAC to develop an EPSDT and IDEA Part C outreach plan that includes all stakeholders and connects parents and providers in the CCDF program to the services and support that they need.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); Division of Medicaid; MS Department of Health First Steps Early Intervention Program; MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will distribute the identified resources through a variety of communication channels, including but not limited to agency websites, consumer education website, printed material, email, and video. Information will be provided for two different audiences: parents and providers.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); Division of Medicaid; MS Department of Health First Steps Early Intervention Program; MS Department of Education

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

a) How does the State/Territory define substantiated parental complaint

Both the MS Department of Human Services and the MS State Department of Health maintain records of substantiated complaints.

The Lead Agency currently does not have direct access to records of substantiated parental complaints regarding the health and safety of children within licensed centers that can be presented in provider-specific, publically viewable format. This information regarding substantiated parental complaints within licensed child care centers is housed in the Mississippi State Department of Health (MSDH). If a parent would like information about a particular child care provider's complaint records, he/she must submit a public records request to either MDHS or MSDH. However, the Lead Agency and the MS State Department of Health seek to make this information more readily available. At this time, if a request for information regarding a licensed center is submitted to MDHS, the request is then sent to MSDH. MSDH then responds to the request and communicates this information to MDHS (when applicable) or to the requestor. Each agency has in place separate procedures for public requests, and communication between MDHS and MSDH regarding complaint records is handled on a case-by-case basis.

Substantiated parental complaint may include any of the following:

- Complaint received from a parent regarding an unlicensed center when that complaint

results in a monitoring visit *and* a finding or corrective action plan. *This information is maintained by the Lead Agency.*

- Complaint received from a parent regarding the child care payment program within either a licensed or unlicensed center that is substantiated through an audit or fraud investigation by the MDHS Division of Program Integrity. *This information is maintained by the Lead Agency.*
- Complaint received from a parent regarding the health and safety of children within a licensed center. *This information is maintained by the MS State Department of Health.*

Both the MS State Department of Health and the MS Department of Human Services have separate procedures for responding to public record requests.

b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

The Lead Agency stores information in CCPS, which is the data system for the certificate program, as well as in spreadsheets. The MS State Department of Health Division of Child Care Licensure maintains spreadsheets and physical files of substantiated parental complaints.

c) How does the State/Territory make substantiated parental complaints available to the public on request

The Lead Agency currently does not have direct, physical access to records of substantiated parental complaints regarding the health and safety of children within licensed centers that can be presented in provider-specific publically viewable format. This information is housed in the Mississippi Department of Health (MSDH). At this time, if a parent would like information about a particular child care provider's complaint records, he/she must submit a public records request to either MDHS or MSDH. If submitted to MDHS, the request is then sent to MSDH. MSDH then responds to the request and communicates this information to MDHS (when applicable) or to the requestor. Each agency has in place separate procedures for public requests and communication between MDHS and MSDH regarding compliant records is handled on a case by case basis.

d) Describe how the State/Territory defines and maintains complaints from others about providers

The Lead Agency maintains a combination of paper and electronic compliant records.

Substantiated parental complaint may include any of the following:

- Complaint received from a parent regarding an unlicensed center when that complaint results in a monitoring visit *and* a finding or corrective action plan. *This information is*

maintained by the Lead Agency.

- Complaint received from a parent regarding the child care payment program within either a licensed or unlicensed center that is substantiated through an audit or fraud investigation by the MDHS Division of Program Integrity. *This information is maintained by the Lead Agency.*
- Complaint received from a parent regarding the health and safety of children within a licensed center. *This information is maintained by the MS State Department of Health.*

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ Application in other languages (application document, brochures, provider notices)
- ☑ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☑ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☑ Bilingual caseworkers or translators available
- ☐ Bilingual outreach workers
- ☐ Partnerships with community-based organizations
- ☐ Other

The Lead Agency has agreements with universities (University of Mississippi and the University of Southern Mississippi) to provide translation services in other languages should a translation need arise.

- ☐ None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages

Informational materials and bilingual caseworkers available for Spanish-speaking individuals.

The website is currently translated to Spanish and Vietnamese. These are the two largest populations of non-English speakers in Mississippi. MDHS also maintains contacts at the University of Mississippi and the University of Southern Mississippi should an additional translation need arise.

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

The Lead Agency has collaborative partnerships with the Mississippi Department of Education's Early Childhood Special Education Part C Coordinator and the MS Department of Health First Steps Program to support referrals for children in need of early intervention services. The Institute for Disability Studies provide education and outreach services to childcare providers to support their care of children with disabilities.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

The State/Territory must make public certain information about the results of such monitoring on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory's consumer education website.

☐ Fully implemented and meeting all Federal requirements outlined above - by March 1, 2016.

Provide the link to the website:

and describe how the consumer education website meets the requirements to:

a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe

b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe

d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Lead Agency continues to work with subject matter experts and IT developers to create a consumer education website which can be tested for functionality and content by members of the SECAC.

Unmet requirement - Identify the requirement(s) to be implemented Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, specifically the Mississippi State Department of Health (MSDH), to identify a strategy to make records housed by the Division of Licensure publicly available, including provider-specific information about health and safety, monitoring reports, licensing or regulatory requirements, last date of inspection, and history of violations.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee), MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Lead agency will begin monitoring unlicensed providers for compliance with health and safety and violations. The Lead Agency will develop procedures for conducting inspections, implementing corrective action plans, and recording the results of violations so that the information can be made publicly available. The Lead Agency will define what constitutes a critical violation, as this information will be included on the consumer education website.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Data housed by the MS State Department of Health and the MS Department of Human Services will be merged to create a single dataset of provider-specific records on health and safety that can be viewed by members of the public.

Projected start date for each activity: 05/01/2017
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will integrate merged data (regarding provider-specific history of monitoring and inspection) into the consumer education website.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will seek feedback from the SECAC regarding the presentation of provider-specific information about health and safety on the consumer education website to ensure that information is presented in a way that is consumer-friendly and easy to understand.

Projected start date for each activity: 06/30/2017
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC, MS State Department of Health

Unmet requirement - Identify the requirement(s) to be implemented A description of health and safety requirements and licensing or regulatory requirements for child care providers.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine the best way to present information (to the target audience of child care providers and parents) regarding health, safety, and licensing as required by the MS State Department of Health and the MS Department of Human Services.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health; SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency and the MS State Department of Health will work together to determine the content for the website and will establish a formalized process and communication plan to ensure that the information posted to the consumer education website is up to date on an ongoing basis.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS State Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health; SECAC

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will build a wire frame for the consumer education website. The website will be subdivided into different portions for target audiences, including parents and providers.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Information (regarding health and safety as well as licensing requirements) will be posted to the consumer education website. Information will be targeted to specific audiences (parents and providers). Consumers visiting the website may be directed (through a live link) to the MS State Department of Health Division of Child Care Licensure website, which contains information about licensing.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health; SECAC

Unmet requirement - Identify the requirement(s) to be implemented A description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders via the SECAC to determine the best way to present processes for licensing, background checks, monitoring and offenses that prevent individuals from being providers.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health; SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the MS State Department of Health to determine the content for the consumer education website (specifically regarding licensing, background checks, monitoring, and offenses that prevent individuals from being providers). The two agencies will establish a formal procedure and communication plan to post information to the consumer education website and ensure that the information is up to date on an ongoing basis.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will build a wire frame for the consumer education website. The website will be subdivided into different portions for target audiences, including parents and providers.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Information (on licensing, background checks, monitoring, and offenses that prevent individuals from being providers) will be posted to the consumer education website. Consumers may be directed (through a live link) to the MS State Department of Health Division of Child Care Licensure website, which houses relevant information. Information posted to the website will be updated as necessary throughout full implementation of all new requirements (specifically background check requirements).

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information as it is presented on the consumer education website to the SECAC and the general public. Feedback will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Provider Organizations

Unmet requirement - Identify the requirement(s) to be implemented Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will coordinate with MSDH to gather aggregate information about the number of deaths, number of serious injuries, and the number of incidences of substantiated child abuse in child care settings.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health; SECAC (specifically Health, Mental Health, and

Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the MS State Department of Health to determine content (aggregate information about the number of deaths, number of serious injuries, and the number of incidences of substantiated child abuse in child care settings) for the website and establish a communication plan to ensure that the information on the website is updated on an ongoing basis.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will build a wire frame for the consumer education website. The website will be subdivided into different portions for target audiences, including parents and providers.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will add information (specifically aggregate information about the number of deaths, number of serious injuries, and number of incidences of substantiated child abuse in child care settings) to the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information (aggregate information about the number of deaths, number of serious injuries, and number of incidences of substantiated child abuse in child care settings) as it is presented on the consumer education website to the SECAC and the general public. Feedback will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC

Unmet requirement - Identify the requirement(s) to be implemented The website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with software developers to create a wire frame for the consumer education website. The website will include provider-specific and parent-specific tabs housing the appropriate resources.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will define relevant terms, such as exempt care and corrective action plan.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete

implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the MS State Department of Health to present the results of monitoring and inspections, including the identification of critical violations, in plain language. This information will be posted on the consumer education website.

Projected start date for each activity: 05/01/2017
Projected end date for each activity: 11/19/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will provide frequently asked questions on the consumer education website.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS

State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will make website information accessible in English, Spanish, and Vietnamese

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit information as it is presented on the consumer education website to the SECAC and the general public. Feedback will be used to improve the functionality of the site.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with to complete implementation of this activity

SECAC; Provider Organizations

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to "deliver high-quality, coordinated early childhood care and education services to maximize parents" options and support parents trying to achieve independence from public assistance"; and "to improve child care and development of participating children." (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements - and the opportunity for children to form trusting relationships with teachers - are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have 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 job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child includes that a family's assets may not exceed $1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local pre-kindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

In order to be eligible for services, children must (1) be under the age of 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 such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a.). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves childrenfrom birth, 11 months (weeks/months/years) to 12 years, 11 months years (through age 12).

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))

☑ Yes, and the upper age is 18 yrs. 11 months (may not equal or exceed age 19).
Provide the Lead Agency definition of physical or mental incapacity: A child under the age of 19 who meets the SSI definition of disability by having a medically determinable physical or mental impairment that results in marked and severe functional limitations and that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months. Documentation of SSI benefits is sufficient to determine priority eligibility for child care. In the absence of SSI benefits, the applicant must submit a statement to DECCD from the child's physician indicating that the child's condition renders them incapable of age-appropriate self care activities AND requires additional personnel with specialized training to help them function in their child care environment.
☐ No

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))

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

3.1.2 How does the Lead Agency define the following eligibility terms?

a) residing with -

living with, including taking meals and sleeping in the same house for a majority of a seven day period beginning with Sunday and ending with Saturday. (Per Child Care Policy Manual Glossary of Terms)

b) in loco parentis -

in place of parent, for example, a guardian or a relative or friend with whom the child resides if the child's parent is unable to act as the parent or has delegated his or her authority to someone else. The term describes someone who provides care and supervision like a parent but without going through the formalities of legal adoption or guardianship. (Per Child Care Policy Manual Glossary of Terms)

3.1.3 Eligibility Criteria Based on Reason for Care

a) How does the Lead Agency define "working, attending job training and education" for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).

* working:

Performing duties to earn a wage (for a minimum of 25 hours per week) or complete education/job training such as practicums or internships (enrollment for education/training must be full time). (Per Child Care Policy Manual Glossary of Terms)

* attending job training

Full time enrollment in an education and/or training program resulting in a degree or certificate designed to promote job skills and employability. Full time is determined by the institution. (Per Child Care Policy Manual Glossary of Terms)

* attending education

Full time enrollment in an education and/or training program resulting in a degree or certificate designed to promote job skills and employability. Full time is determined by the institution. (Per Child Care Policy Manual Glossary of Terms)

b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?

☑ Yes.

☐ No.

If no, describe additional requirements

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

☑ Yes. If yes, how does the Lead Agency define "protective services" for the purposes of eligibility? Provide a brief description below.

1) Definition of protective services -

Children that are court ordered to receive Protective Services from the Department of Child Protection Services. These children are living in the home of a parent or relative/kinship caregiver. (Per Child Care Policy Manual Glossary of Terms)

2) Does the Lead Agency waive the co-payment and income eligibility requirements

for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5))

☐ Yes.

☑ No.

Note - If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in the protective services definition above.

☐ No.

3.1.4 Eligibility Criteria Based on Family Income

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

* Definition of income -

Income refers to funds received by all applicable individuals as described in policy that are not supplemented by public assistance other than food stamps or medical assistance and that do not exceed 85 percent of the State Median Income (SMI) per the Child Care Policy Manual Glossary of Terms.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ **Note** - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) ($/month)	(b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	not applicable	not applicable	not applicable	not applicable		
2	$3,770	$3,205	$2,333	62%		
3	$4,094	$3,480	$2,917	71%		
4	$5,200	$4,420	$3,416	66%		
5	$4,652	$3,955	$4,000	86%		

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal poverty guidelines are available at http://aspe.hhs.gov/poverty/index.cfm.

c) SMI Source and year ACS - US Census Bureau, 2014 (1 year estimates). This update to the SMI will become effective on Oct 1, 2016.

d) These eligibility limits in column (c) became or will become effective on: Oct 1, 2004

e) Provide the link to the income eligibility limits http://www.mdhs.ms.gov/early-childhood-care-development/for-parents/child-care-certificate-program/income-eligibility-guidelines/ - This page will be updated when new eligibility limits are effective

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first applying for assistance and those already receiving assistance, sometimes called and "exit threshold") or by granting a sustained period of continued assistance to the family before

termination.

Describe the status of the State/Territory's policy regarding graduated phase-out of assistance.

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

Families are eligible for the CCPP up to 85% SMI. Families whose income has increased at the time of redetermination up to 85% SMI are still considered eligible, although some parents may experience a change in priority population (such as from 50th work to 85th work) without a disruption in service.

Eligibility Policy: 101.02

Redetermination Policy: 102.04

☐ Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory's (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II))

Note - this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory's policy related to the fluctuation in earnings requirement.

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

Irregular hours of employment and income should be averaged per Policy Manual Section 102.03(1)(C-D). Parents who experience seasonal fluctuations in income must submit income documentation to support the irregularity.

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here.

Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start

standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

☑ Applicant identity.

Describe:

Parents must submit copies of their Driver's license or state-issued ID.

☑ Applicant's relationship to the child.

Describe:

Parents must submit a Long Form Birth Certificate. Guardians who are not the biological parents of the child must submit the Guardianship/In Loco Parentis Verification Form.

☑ Child's information for determining eligibility (e.g., identity, age, etc.).

Describe:

A long form birth certificate is required.

☑ Work.

Describe:

Parents must submit two check stubs from within the past 30 days. If paid once a month, only one check stub is required.

☑ Job Training or Educational Program.

Describe:

Parents enrolled in an approved educational program must provide enrollment documentation in the form of a letter from the institution's registrar confirming current full time enrollment. GED classes should be handled the same as any other approved educational training. Teen parents enrolled in high school should submit verification of enrollment from the school principal.

☑ Family Income.

Describe:

Parents must submit two check stubs from within the past 30 days. If paid once a month, only one check stub is required. Children in FC/PS or Healthy Homes Mississippi are served without regard to income.

☐ Household composition.

Describe:

☑ Applicant Residence.

Describe:

Parents must supply a current driver's license or state issued I.D. and a current bank statement, cell phone bill, utility bill, or cable bill.

☑ Other.

Describe:

All single or separated parents must be cooperating with child support. The eligibility worker will use the parent's information to verify whether or not the parent has an open child support case. Married parents are not required to go through the MDHS, Division of Child Support Enforcement. This includes parents who have an existing order for child support issued by a judge.

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

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

☑ Time limit for making eligibility determinations.

Describe length of time :

Once an application is submitted and documentation is received, the Lead Agency will send a written notice of eligibility, ineligibility, or non-availability of funds within 10 business days. MDHS does not currently send out a written notice of ineligibility due to not providing the necessary paper work.

☑ Track and monitor the eligibility determination process

☐ Other.

Describe:

The Lead Agency's data system is capable of producing a report, which is used as an

oversight tool, to track the amount of time it takes agency staff members to make an eligibility determination.

☐ None

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

Per CCDF regulations, 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 under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant 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 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:

State/Territory TANF Agency MDHS Division of Field Operations

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

"appropriate child care":

A licensed child care center or a family day care(home or an individual) chosen by the parent/caretaker relative to care for the child. The child care provider must be 18 years old or older.

"reasonable distance":

Appropriate child care must be within a reasonable distance (within a 20-mile radius) of the parent/caretaker relative's home or worksite.

"unsuitability of informal child care":

Unavailable or unsuitable child care shall be defined as a situation involving child abuse, neglect or an unsafe environment. If the parent/caretaker relative refuses to take the

child to a particular day care center, he/she must inform the case manager of the reason for the refusal. The case manager must investigate to verify and substantiate the parent's claim of unsuitable child care. Complaints involving child abuse, neglect or an unsafe environment will be reported to the MS State Health Department, Division of Child Care Facilities Licensure. The case manager must contact DECCD to discuss the problem and determine what other child care services are available in the area. The case manager will determine good cause for non-participation based on the investigation and information gathered.

"affordable child care arrangements":

Affordable formal child care is child care that is equal to or less than the established rates for the type of care according to the Mississippi Child Care Payment Program Policy Manual.

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

☐ In writing

☑ Verbally

☐ Other.

Describe:

☑ List the citation to this TANF policy.

List:

TANF Policy Volume III, Chapter 10

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed $1,000,000. A check-off on the application is sufficient

☑ Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed $1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did notchange under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

a. Provide definition of "Children with special needs": A child under the age of 19 who meets the SSI definition of disability by having a medically determinable physical or mental impairment, which results in marked and severe functional limitations, and which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months (per Child Care Payment Policy Manual Glossary of Terms)

and describe how services are prioritized:

Children with special needs are in our second priority level for special populations up to 85% SMI. Children with special needs can be served even if a Pending Funding list is in effect. Documentation of SSI benefits is sufficient to determine priority eligibility for child care. In the absense of SSI benefits, the applicant must submit a statement to DECCD from the child's physician indicating that the child's condition renders them incapable of age-appropriate self care activities AND requires additional personnel with specialized training to help them function in their child care environment. DECCD also reimburses providers at a higher rate for children with special needs as described in Appendix N of the CCPP Policy Manual.

b. Provide definition of "Families with very low incomes": Income at or below 50 percent of the State Median Income (SMI).

and describe how services are prioritized:

Families with very low incomes are our 3rd priority level (after referred clients and special/at-risk populations).

c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)

TANF and TCC families are referred clients and are our first priority level. These families can be served even when a Pending Funding list is in effect.

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

Describe the status of the State/Territory's procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

b. Procedures to conduct outreach to homeless families to improve access to child care services

c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

1. Allow homeless children to receive CCDF assistance. The Lead Agency has created a priority population for homeless clients.

2.Conduct specific outreach to homeless families. The Lead Agency accepts referrals for homeless families directly from community based organizations or shelters providing services to homeless families. DECCD has begun to accept referrals from a limited number of agencies at this time but will continue to identify partner organizations to expand access across the state.

Unmet requirement - Identify the requirement(s) to be implemented A grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, specifically SECAC and Mississippi State Department of Health, to determine policy strategies for immunization grace periods.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MSDH Division of Childcare Licensure; Department of Child Protection Services

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies that will allow providers to serve children immediately without immunization. The Lead Agency will work with the MS State Department of Health to negotiate administrative approval for these policy strategies within MS Department of Human Services and MS State Department of Health leadership.

Projected start date for each activity: 06/01/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding a grace period that allows homeless children and children in foster care to comply with immunizations) to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies to allow a grace period for the immunization of homeless for foster children. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process;

Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The MS Department of Human Services and the MS State Department of Health will train their respective staff on policy changes (regarding immunization grace periods) and procedures to monitor compliance.

The Lead Agency will train caseworkers within the Department of Child Protection Services and Homeless Organization Referral Agents on the new policy changes and procedures. This training will include strategies to communicate immunization requirements to families when they enter the subsidy program.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health, MS Department of Child Protection Services; Homeless Referral Agencies

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize new requirements regarding immunization grace periods. The Lead Agency will communicate with parents, licensed and unlicensed providers, referral agents, and key stakeholders using multiple channels of communication, including email, agency websites, online videos, and direct contact with caseworkers.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Department of Child Protection Services; Homeless Referral Agencies

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes and train providers through a variety of platforms, including but not limited to email, in-person training, and video.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health; Department of Child Protection Services; Homeless Referral Agencies

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement immunization grace period policies. The Lead Agency will work with the MS State Department of Health to establish protocol to monitor compliance with this new policy on an ongoing basis.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Unmet requirement - Identify the requirement(s) to be implemented 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will consult with SECAC (specifically the McKinney-Vento State coordinator housed in MDE) to identify organizations that can provide training to providers in a variety of formats on how to identify and serve homeless children and families.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee and the Family Support Committee); McKinney-Vento State Coordinator at MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will collaborate with partners to develop and implement training and technical assistance modules (as determined necessary). Trainings may be provided in a variety of formats (including online or in-person).

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee and the Family Support Committee); McKinney-Vento State Coordinator; Agencies Serving Homeless Children and Families; Early Years Network

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency, in collaboration with partners, will incorporate trainings (to identify and serve homeless children and families) into the larger professional development infrastructure.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Department of Education; MS State Department of Health; Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize the availability of training and technical assistance on identifying and serving homeless children and families. The Lead Agency will communicate with providers using a variety of communication methods, including email and the consumer education website.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health; MS Department of Education; Early Years Network; Provider Organizations

3.3 Protection for Working Parents

3.3.1 Twelve Month Eligibility

The CCDBG Act of 2014 establishes a 12-month eligibility period for CCDF families. States are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) &(ii))

Note that this change means a State may not terminate CCDF assistance during the 12 month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period

for CCDF families.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination
List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other) Substantially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable
The Lead Agency has a 12-month eligibility period for non-referred clients (which include TANF/TCC/FCPS/HHM/homeless clients within the first priority level). TANF and TCC (Transitional Child Care) clients are exempt from redetermination processes. FCPS (foster care and protective services) caseworkers are asked to complete the redetermination process on behalf of the parent every 12 months. Currently, HHM (Healthy Homes Mississippi) and homeless agency caseworkers issue terminations at any time (which may be prior to 12 months). FCPS caseworkers issue terminations at any time (which may be prior to 12 months) when the child is moved to another family; however, care can be reinstated with the new family with no disruption in service.

Unmet requirement - Identify the requirement(s) to be implemented A minimum 12-month eligibility and redetermination period for CCDF families.

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies for 12-month eligibility.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train subsidy staff on policy and procedural changes regarding 12 month eligibility. Training will be offered in person.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not applicable

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train referral agents (including Temporary Assistance for Needy Families (TANF), Healthy Homes Mississippi (HHM), Department of Child

Protection Services; and Homeless Referral Agencies) on new requirements for 12 month eligibility. Referral agents will be trained on any new procedures necessary to ensure their clients receive 12 months of eligibility. Training for referral agents will be offered online and in person as needed.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services (including the Division of Field Operations)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Healthy Homes Mississippi (HHM); Department of Child Protection Services; and Homeless Referral Agencies

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding 12 month eligibility. The Lead Agency will communicate with parents, providers, and key stakeholders through a variety of communication methods including email, the Lead Agency website, and the consumer education website.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement policies and practices to ensure 12 month eligibility for all clients. The Lead Agency will conduct internal monitoring to make sure all children are eligible for 12 months prior to termination.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not applicable

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will determine policy strategies to allow for 12-month eligibility following a Healthy Homes Mississippi termination (as clients are currently terminated at any time upon the recommendation of the caseworker).

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Healthy Homes Mississippi; SECAC (specifically the Family Support Committee)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will determine policy strategies to allow for 12-month eligibility following a termination from a homeless referral agent (as clients are currently terminated at any time upon recommendation of a caseworker).

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Homeless Referral Agencies; SECAC (specifically the Family Support Committee)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will determine policy strategies to allow for 12-month eligibility when a TANF client is terminated prior to 12 months and is not referred to Transitional Child Care (TCC), which would allow for 24 months of continued eligibility.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human (TANF and TCC clients are referred to DECCD by the Division of Field Operations within the Lead Agency)

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will determine policy strategies to allow for 12-month eligibility for adopted foster children.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Department of Child Protection Services; SECAC (specifically the Family Support Committee)

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies and negotiate administrative approval for policy strategies (for 12-month eligibility) within MS Department of Human Services leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not applicable

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding 12-month eligibility) to the Secretary of State's office for approval. Proposed policies will include the removal of the requirement that parents who are students must submit proof of continuing enrollment prior to 12-month redetermination.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period on proposed policies for 12-month eligibility. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Service

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities -What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with information technology specialists to update the Child Care Payment Systems (CCPS) with new business rules to allow for 12-month eligibility across all priority populations.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Information Technology Services

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option - but does not require them - to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period - the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent's non-temporary loss of work or cessation of attendance at a job training or education program?

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

DECCD allows a 60 day job search prior to termination (this period will be extended to 90 days upon publication of final federal rule). Clients are required to notify DECCD within

ten days of non-temporary job loss or non-temporary cessation of an educational program. The job search policy is described in Child Care Policy Manual Section 105.01 and will be updated in the new policy manual pending publication of final federal rule. Job loss is considered non-temporary when the individual resigns, retires, is fired, or is laid off for a period expected to last in excess of three months. Cessation of attendance at a job training or educational program is considered non-temporary if the individual graduates from the program, drops out with no intent to re-enroll within 90 days, or is suspended for a period of time in excess of 90 days.

☐ No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

TANF, TCC (Transitional Child Care), HHM (Healthy Homes MS) and Homeless clients are

exempt from redetermination. FCPS (Foster Care Protective Services) caseworkers are asked to complete the redetermination process on behalf of their foster/protective service clients. All other non-referred clients are redetermined annually and are sent a 60 day and a 30 day notice of redetermination. The application is online, and parents are asked to submit the application as well as any necessary documentation prior to the due date listed on the notice(s). Parents are not required to complete any portion of the redetermination application in person or during standard work hours. Redetermination policies are described in Child Care Policy Manual Section 102.04, but will be updated in the next iteration of the policy manual to reflect technological advances (specifically the online application).

☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size.

☐ Note - If the sliding fee scale is not statewide, check here

and describe how many jurisdictions set their own sliding fee scale

Fill in the chart based on the most populous area of the State.

Family Size	(a) Lowest "Entry" Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b)?	(d) Maximum Highest "Entry" Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1						
2	$0-$9,999 annually	10	1%	$27,999 annually	159	6%
3	$0-$9,999 annually	10	1%	$34,999 annually	212	7%
4	$0-$9,999 annually	10	1%	$40,999 annually	257	7%
5	$0-$9,999 annually	10	1%	$47,999 annually	310	7%

a) What is the effective date of the sliding fee scale(s)? 10/01/2004

b) Provide the link to the sliding fee scale http://www.mdhs.ms.gov/early-childhood-care-development/child-care-policy-manual/ .

3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use.

- [ ] Fee as dollar amount and
  - [ ] Fee is per child with the same fee for each child
  - [ ] Fee is per child and discounted fee for two or more children
  - [ ] Fee is per child up to a maximum per family
  - [ ] No additional fee charged after certain number of children
  - [ ] Fee is per family
- [x] Fee as percent of income and
  - [ ] Fee is per child with the same percentage applied for each child
  - [ ] Fee is per child and discounted percentage applied for two or more children
  - [ ] Fee is per child up to a maximum per family
  - [ ] No additional percentage applied charged after certain number of children
  - [x] Fee is per family
  - [ ] Contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

  Describe:

  - [ ] Other.

  Describe:

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment? (658E(c)(3)(B))

- [x] Yes, and describe those additional factors using the checkboxes below.
  - [x] Number of hours the child is in care
  - [ ] Lower copayments for higher quality of care as defined by the State/Territory
  - [ ] Other.

Describe other factors.

☐ No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size.

Will the Lead Agency waive family contributions/co-payments?

☐ Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size.

The poverty level used by the Lead Agency for a family size of 3 is $

☑ No, the Lead Agency does not waive family contributions/co-payments

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

☐ Limits the maximum co-payment per family.
Describe:

☑ Limits combined amount of copayment for all children to a percentage of family income.
List the percentage of the copayment limit.
Describe:
Copay is based on a percentage of income (7%).

☐ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5.
Describe:

☐ Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying.
Describe:

☐ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider.
Describe:

☐ Other.
Describe:

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

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: 1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's

occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))

When a parent completes an application for child care, they are asked to select a DECCD-approved provider. A list of approved providers is available on the Lead Agency website. Slot providers are clearly labeled as such. Certificates (subsidies) can be issued to children attending slot providers even when a pending funding list is in effect. When the DECCD Communications Unit receives a call from a concerned parent who has been placed on the pending funding list, the parent is informed of how to locate slot providers in their area (if applicable).

4.1.2 Describe how the parent is informed of the option to choose from a variety of child care categories - such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers (658E(c)(2)(A)(i), 658P(2), 658Q))

☐ Certificate form provides information about the choice of providers, including high quality providers

☐ Certificate is not linked to a specific provider so parents can choose provider of choice

☑ Consumer education materials on choosing child care

☑ Referral to child care resource and referral agencies

☐ Co-located resource and referral in eligibility offices

☐ Verbal communication at the time of application

☐ Community outreach, workshops or other in-person activities

☐ Other.

Describe

Interactive Search Tool: https://www.apps.mdhs.ms.gov/ccis/DECCDProviderSearch.aspx

4.1.3 Child Care Services Available through Grants or Contracts

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

☑ Yes. If yes, **describe**

the type(s) of child care services available through grants or contracts

The Lead Agency has non-competitive sub-grants with various entities to provide child care slots to children and families. Slot providers provide child care to eligible families in their communities by utilizing child care subsidy funds and local investment funds. Additional requirements of slot subgrantees include achieving a 3-star rating in the Quality Stars program and conducting child assessments using the Brigance Assessment tool. These sub-grants are administered by 15 entities at 24 sites across the state, including:

ALPHA KONNECTION ACADEMY (JACKSON);

CALVERT'S ABC PRE SCHOOL NURSERY(ABERDEEN);

CHILDREN'S LEARNING CENTER (VICKSBURG);

CITY OF JACKSON (3 sites);

CORNERSTONE PRESCHOOL AND NURSERY (BROOKHAVEN);

CREATIVE MINDS LEARNING CENTER (JACKSON);

GLOBAL CONNECTION LC (JACKSON);

GOOD SHEPHERD PRESCHOOL (VICKSBURG);
HANCOCK COUNTY HUMAN RESOURCES AGENCY (6 Sites);
HAPPY START LEARNING -GLORY REVEALED MISSION (MACON);
HAPPY START LEARNING CENTER #2 (STARKVILLE);
JACKSON COUNTY CIVIC ACTION COMMITTEE (3 Sites);
KARITAS DAY CARE CENTER (JACKSON);
SANDERSON FARMS INC CHILD CARE CENTER (COLLINS);
and
SUGAR MAGNOLIA LEARNING ACADEMY, INC. (MERIDIAN).

the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)

Sub-grants are issued to child care providers who obtain local investment funds.

the process for accessing grants or contracts

The Lead Agency issues subgrants through a non-competitive bidding process. This process is not continuous. The Lead Agency will issue an RFP and successful applicants are funded as a new cohort. The most recent cohort of slot providers began a 3-year sub-grant on October 1, 2015.

the range of providers available through grants or contracts

The current cohort of slot providers includes local child care centers, community action agencies, municipalities, a business partnership (Sanderson Farms), and a faith-based non-profit.

how rates for contracted slots are set for grants and contracts

Slot provider sub-grantees are paid the same rate as other providers; however, a condition of their sub-grants is that they will strive to attain a 3-star rating, which comes with a rate bonus. Slot providers are also paid prospectively, whereas all other providers are reimbursed.

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

The non-competitive bid process was open statewide. Sub-grants were issued to as many successful applicants as the Lead Agency had the ability to fund in an effort to increase the supply and quality of childcare across the state.

if contracts are offered statewide and/or locally:

The non-competitive bid process was open statewide and not restricted to any location.

☐ No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

☑ Increase the supply of specific types of care with grants or contracts for:

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

Describe:

☑ Improve the quality of child care programs with grants or contracts for:

- ☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- ☐ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- ☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- ☑ Programs to serve children with disabilities or special needs
- ☑ Programs to serve infants and toddlers
- ☑ Programs to serve school-age children

☐ Programs to serve children needing non-traditional hour care

☑ Programs to serve homeless children

☐ Programs to serve children in underserved areas

☐ Programs that serve children with diverse linguistic or cultural backgrounds

☐ Programs that serve specific geographic areas

- ☐ Urban
- ☐ Rural

☐ Other.

Describe:

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

Describe the policies and procedures for unlimited access

Licensed providers must adhere to MSDH Rule 1.4.3 assuring that parents have unlimited access to their child(ren). Unlicensed providers sign the Lead Agency's Basic Health, Safety, and Nutrition Assurances which certifies that parents will have unlimited access to their child(ren).

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. Will the Lead Agency limit the use of in-home care in any way?

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

- ☑ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

  Describe:

Family child care providers may provide care for five or fewer children who are not related within the third degree computed according to civil law.

☑ Restricted based on provider meeting a minimum age requirement

Describe:

Family child care providers must be at least 18 years of age.

☑ Restricted based on hours of care (certain number of hours, non-traditional work hours)

Describe:

Family child care providers should provide services for fewer than 24 hours per day per child unless care in excess of 24 hours is due to the nature of the parents' work (an example of this would be a parent who works a 48 hour shift). The child may not receive in excess of 84 hours during a Sunday through Saturday week.

☐ Restricted to care by relatives

Describe:

☐ Restricted to care for children with special needs or medical condition

Describe:

☑ Restricted to in-home providers that meet some basic health and safety requirements

Describe:

Family child care providers must certify that they meet Basic Health, Safety, and Nutrition Assurances. A signed copy of these assurances will be maintained by DECCD, and compliance will be monitored annually in accordance with CCDF regulations.

☐ Other

Describe:

☐ No.

4.2 Assessing Market Rates and Child Care Costs

The new law revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval. (see http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq).

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the results on the Internet.

The State must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the State must take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

☐ MRS

☐ Alternative Methodology.

Describe:

☑ Both.

Describe:

The Lead Agency conducted an MRS but added a supplemental section which captured information regarding costs incurred by the child care provider for the provision of care.

☐ Other.

Describe:

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology.

Describe:

A link to test the online version (first draft) of the Market Rate Survey Instrument was distributed to stakeholders across the state. These stakeholders were asked to test the online survey and submit feedback to the Lead Agency. The feedback received was reviewed and helpful suggestions were incorporated into the final survey instrument. For example, providers were concerned about the length of the survey and the inclusion of questions regarding provider costs. For this reason, the Lead Agency separated the survey into two distinct sections: the market rate survey and an additional section regarding costs incurred by the provider during the provision of care.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of

quality defined by the State/Territory.

Describe:

The 2016 Market Rate Survey was developed by MDHS. The questionnaire was written based on previous Market Rate Surveys and requirements of the State Plan. The initial survey draft was sent out to stakeholders for review and comments in October 2015. The National Center on Child Care Subsidy Innovation and Accountability (NCCCSIA) was also asked to review the survey and provide comments. Stakeholder and NCCCSIA feedback was incorporated into the final 2016 MRS survey instrument. The initial draft of the survey instrument did not have multiple sections and did not differentiate between questions regarding market rate and questions regarding provider cost. When MDHS sent this initial draft of the survey instrument to stakeholders across the state, providers raised a concern that the addition of the questions regarding provider cost would discourage providers who do not participate in the Child Care Payment Program from completing the survey. In response to this concern, MDHS separated the MRS into two distinct sections. The first section captured market rate information. The second section captured provider cost information. Providers were not required to complete the second section in order to submit the market rate survey. To address a concern related to the length of the survey, the market rate portion of the survey was shortened from 6 to 3 pages.

The 2016 Market Rate Survey was sent to more than 5,000 providers across the state between December 2015 and January 2016 . Providers were asked to utilize online and mail-form surveys. All mail-form surveys received were manually entered into the online form. Once an online form was submitted, the provider could not make changes to it. Data in the Market Rate Survey are self-reported based on the provider's child care costs at the time of the survey.

Geographic variations are captured through county-level analysis. An additional section of the survey allowed providers to elaborate on the costs incurred for the provision of child care services. More information about the Market Rate Survey, including a detailed analysis, is available on the DECCD website at http://www.mdhs.ms.gov/media/328817/MDHS-DECCD-Market-Rate-Survey-2016_final-analysis.pdf.

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

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

Analysis of the MRS data reflects variations in market rate at the county level among the rates charged by childcare providers.

b) Type of provider:

Analysis of the MRS data reflects variations in the market rate by licensed family child care and unlicensed family child care homes. The MRS collected information about whether or not the provider participates in the subsidy program, is a Head Start Center, or is associated with a university.

c) Age of child:

Analysis of the MRS reflects variations in the market rate by the age of the child according to the following age ranges:

- 0-12 months
- 13-36 months
- 3-5 years
- 5-13 years

d) Describe any other key variations examined by the market rate survey, such as quality level

The MRS collected data regarding provider costs in addition to market rates.

4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)

02/25/2016

b) Date report containing results were made widely available, no less than 30 days after the completion of the report 03/11/2016

c) How the report containing results was made widely available and provide the link where the report is posted if available

The report was posted to the Lead Agency website. http://www.mdhs.ms.gov/early-

childhood-care-development/child-care-resources/ccdf-state-plan/

Key stakeholders across the state were emailed the link to the report.

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children).

☐ Note - If the payment rates are not set by the State/Territory, check here

Describe how many jurisdictions set their own payment rates

Payment rates are set at the state level

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

Rate $ 86.52 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 54

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

Rate $ 62.83 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 52

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

Rate $ 82.40 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 54

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

Rate $ 59.74 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 52

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate $ 78.28 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 55

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate $ 56.65 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 53

g) School-age child (6 years), full-time licensed center care in the most populous geographic region

Rate $ 76 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 61

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
Rate $ 55.62 per week unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 57

i) Describe the calculation/definition of full-time care:
Full Time child care is provided for six or more hours of a 24-hour day. Part Time child care is provided for fewer than six hours per day. (Per Child Care Policy Manual Glossary of Terms)

j) Provide the effective date of the payment rates : November 2011

k) Provide the link to the payment rates : The payment rates are available in the Child Care Policy Manual. This manual is available at the following web address. http://www.mdhs.ms.gov/early-childhood-care-development/child-care-policy-manual/ .

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an

incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☐ Tiered rate/rate add-on for non-traditional hours.

Describe:

☑ Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

Children with Special Needs receive an increased reimbursement rate. These rates are described in Policy Manual Section N, but will be updated in accordance with the most recent MRS.

☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

☑ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

Star rated programs receive the following tuition subsidy bonuses: 2 Star - 7%, 3 Star - 17%, 4 Star - 22%, 5 Star - 25%.

☐ Tiered rate/rate add-on for programs serving homeless children.

Describe:

☐ Other tiered rate/rate add-on beyond the base rate.

Describe:

☐ None.

4.3.3 Describe how the State/Territory set payment rates for child care services in

accordance with the results of the most recent market rate survey or alternative methodology

Describe:

The most recent Market Rate Survey was completed on 2/25/2016. Payment rates have not yet been changed to reflect the current market rate.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

Describe:

The Lead Agency will utilize all funds received as efficiently as possible in light of new requirements regarding reimbursement rates and equal access. All funding decisions are made with the goal of serving the highest number of children possible while still considering the cost of providing higher-quality child care services.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access - such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

☐ Payment rates are set at the 75th percentile or higher of the most recent survey.

Describe:

☑ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.

☐ Rates based on data on the cost to the provider of providing care meeting certain standards

Describe:

☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile.

Describe:

☐ Data on the proportion of children receiving subsidy being served by high-quality providers.

Describe:

☐ Data on where children are being served showing access to the full range of providers. .

Describe:

☐ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.

Describe:

☐ Feedback from parents, including parent survey or parent complaints.

Describe:

☐ Other.

Describe:

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

☐ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene stakeholders, via the SECAC, to determine policy strategies for ensuring equal access based on the results of the most recent market rate survey (MRS). Policy strategies will include drafting the state's definition of equal access.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (to ensure equal access based on the results of the most recent MRS) and negotiate administrative approval for policy strategies within MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit suggested policies (regarding equal access to child

care, including updated payment rates to align with the most recent MRS) to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies to ensure equal access based on the results of the most recent MRS. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff on new policies to ensure equal access as well as new payment rates that align with the most recent MRS. Lead Agency staff

will be trained on how to ensure that payment rates are assigned correctly during and after implementation.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize new policies to ensure equal access as well as updated payment rates based on the results of the most recent MRS. The Lead Agency will communicate this information using a variety of communication methods, including email and agency websites (e.g., the consumer education website).

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with information technology specialists to update payment rates in the Child Care Payment System (CCPS).

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Information Technology Services

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement new payment rates to ensure equal access. The Lead Agency will conduct monthly quality assurance checks to ensure that the Child Care Payment System is assigning the correct payment rates. Implementation of this new requirement will coincide with the federal fiscal year.

Projected start date for each activity: 09/30/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Information Technology Services

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory's payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory - so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The Lead Agency issues payments to two categories of providers: slot providers and all other DECCD-approved providers. Slot providers are paid prospectively. Reimbursements for all other DECCD-approved providers are issued once the provider submits an attendance e-ledger. The Lead Agency runs two payment cycles a month to ensure prompt payment for services. Providers are reimbursed for 15 absences per year. Providers are paid for the provision of full-time (six or more hours) or part-time (six or fewer hours) care rather than for smaller increments of time. The Lead Agency provides notice to providers regarding changes in eligibility within one business day of the eligibility determination, and providers are also given a two-week notice before termination. The Lead Agency provides a form for dispute of payment, which is available on the website for submission (24 hours a day, 7 days a week) in order to resolve such issues as quickly as possible.

Unmet requirement - Identify the requirement(s) to be implemented To the extent

practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child¿s occasional absences due to holidays or unforeseen circumstances such as illness.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies for enrollment and eligibility that support the fixed cost of providing childcare. Stakeholders will review current state policies and consider delinking provider payments from a child's occasional absences.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (regarding enrollment and eligibility that support the fixed cost of childcare) and negotiate administrative approval within MDHS leadership for any policies that need to be changed or strengthened.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding enrollment and eligibility that support the fixed cost of childcare) to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/01/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission process to the Secretary of State's office, the Lead Agency will have a 30-day public comment period regarding proposed policies for enrollment and eligibility that support the fixed cost of childcare. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff on new policies regarding enrollment and eligibility that support the fixed cost of childcare. The staff will be trained on how to implement new policies and monitor compliance. Training will be conducted in person.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding enrollment and eligibility that support the fixed cost of childcare. Providers will be notified using a variety of communication channels, including email, the state agency website, and online videos.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity The MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement policy changes regarding enrollment and eligibility that support the fixed cost of childcare (including any changes to the business rules in the Child Care Payment System). The Lead Agency will support and monitor provider compliance.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory le agency to complete implementation of this activity

Not Applicable

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. Check all that apply an describe.

The Lead Agency

☑ Pays prospectively prior to the delivery of services.

Describe:

The Lead Agency pays slot providers prospectively. All other providers are reimbursed

☑ Pays within no more than 21 days of billing for services.

Describe:

The information below is available on the Lead Agency Website and describes the submission of payment: http://www.mdhs.ms.gov/early-childhood- care-development/fo providers/child-care-payment-system-eledger/.

Payment ledgers must be submitted electronically through the Child Care Payment System once a month. Providers have the opportunity to submit ledgers during one of two payment cycles during the month; however, providers will only receive one payment per month for services rendered. Ledgers are open to providers on the 1st day of the month and remain open until 11:59 p.m. CST on the 5th day of the month. Providers who submit their ledgers by the 5th will be issued payment by the 15th. Providers who fail to submit their payment ledgers by the 5th have the option to submit their ledgers by 11:59 p.m. CST on the 15th day of the month. Providers who submit their ledgers by the 15th will be issued payment by the 30th.

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe

Specify percent and describe

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.

Specify the number of absence days allowed and paid for and describe

Providers are reimbursed for 15 absences per year. Absences related to court-ordered visitation, chronic illness, and medical treatment for children with special needs are paid absences.

Child Care Payment Program Policy Manual Section: 105.01 (8)

☑ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

The Lead Agency issues Full-Time certificates to children who are not enrolled in school (compulsory age for school attendance in MS is 6) and Full-Time/Part-Time certificates to school-aged children.

Full-Time payments are issued for child care provided for 6 or more hours of a 24-hour

day. Full-Time payments for school-aged children may not be issued to students enrolled in grades 1 through 12 unless full-time care is needed during non-traditional hours, the primary school setting is closed, or the child is in out-of-school suspension.
Part-Time payments are issued for child care provided for fewer than 6 hours per day.

Child Care Payment Program Policy Manual Section: 104.04

☐ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

Describe:

☑ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

Providers are sent authorizations and terminations (which come with a two weeks' notice period) via email. These emails are sent to providers within one business day of the eligibility determination.

☑ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

Providers are required to notify DECCD within 10 business days to report any inaccuracy or dispute that would affect payment.

Child Care Payment Program Policy Manual Section: 104.03

Providers may submit an online form (at any time, 24 hours a day, 7 days a week) to file a payment dispute: http://www.mdhs.state.ms.us/early-childhood-care-development/for-providers/deccd-service-request-forms/.

☐ Other.

Describe:

☐ For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

☐ Policy on length of time for making payments.

Describe length of time:

☑ Track and monitor the payment process

Describe:

Providers who submit their ledgers between the first and the fifth of each month will be mailed a check by the fifteenth of the month.

☑ Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

The Lead Agency uses on online e-Ledger which allows for automatic billing. Ledgers are generated at the end of the service month and providers are asked to verify attendance for reimbursement.

☐ Other.

Describe:

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

☑ Yes.

Describe data sources

The Lead Agency reviews county level data on the number of licensed and DECCD-approved unlicensed providers; the Lead Agency reviews county level census data on

children under the age of 5 and 13; and the Lead Agency also reviews the number of children on subsidy as well as the number of applications on the Pending Funding list.

☐ No.

If no, how does the State/Territory determine most critical supply needs?

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

a) Infants and toddlers (check all that apply)

- ☑ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☑ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

b) Children with disabilities (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☑ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other.

Describe

c) Children who receive care during non-traditional hours (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

☐ Tiered payment rates (as discussed in 4.4.1)

☐ Other.

Describe

d) Homeless children (check all that apply)

☑ Grants and contracts (as discussed in 4.1.3)

☐ Family child care networks

☐ Start-up funding

☐ Technical assistance support

☐ Recruitment of providers

☐ Tiered payment rates (as discussed in 4.4.1)

☐ Other.

Describe

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q))

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

☐ Fully implemented and meeting all Federal requirements outlined above.

Describe

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including

planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to utilize census data and other data sources to identify areas of the state with high concentrations of poverty and unemployment.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the SECAC to define high concentrations of poverty or establish a scale of poverty levels.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will work with the SECAC to determine policy strategies for increasing access to quality child care in areas with high concentrations of poverty.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

If deemed necessary, the Lead Agency will draft policies (regarding increasing access to quality programs in areas with significant concentrations of poverty) and

negotiate agency approval within MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

If it is deemed necessary to change existing policy, the Lead Agency will submit proposed policies to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's office, the Lead Agency will have a 30-day public comment period for proposed policies regarding increasing access to childcare in areas with high concentrations of poverty. The Lead Agency will conduct a public hearing during this time.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC will encourage participate in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train MDHS staff regarding any necessary policy changes regarding increasing access for high concentrations of poverty.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize any changes in policy regarding increasing access to areas with significant concentrations of poverty. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, the consumer education website, and online videos.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As deemed necessary, the Lead Agency will implement any changes regarding increasing access to quality programs in areas with significant concentrations of poverty.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with

child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

CENTER-BASED - A non-residential facility in which shelter and personal care is regularly provided for six or more children who are not related within the third degree computed according to the civil law to the operator and who are under the age of 13 and receive care for any part of a 24 hour day. For all child care centers, as defined above, related children of all staff must be included in the licensed number. These centers are considered commercial establishments and must meet all requirements of the Regulation Governing Food Services Sanitation. Additionally, these licensed centers must remain in compliance at all times with the Mississippi State Department of Health's Regulations Governing Licensure of Child Care Facilities. (per Child Care Policy Manual Glossary of Terms)

FAMILY CHILD CARE HOME - An occupied residence in which shelter and personal care is regularly provided for five or fewer children who are not related within the third degree computed according to the civil law to the provider and who are less than 13 years of age and are provided care for any part of the 24-hour day. These homes may voluntarily register with the Mississippi State Department of Health and must be registered with the Division of Early Childhood Care and Development, Mississippi Department of Human Services. The

provider must be at least 18 years old and cannot be a biological parent of the child receiving assistance. (per Child Care Policy Manual Glossary of Terms)

GROUP HOME CHILD CARE - An occupied residence in which shelter and personal care are regularly provided for six to 12 children who are not related within the third degree computed according to civil law to the operator and who are under the age of 13 and receive care for any part of the 24-hour day. Children related within the third degree are included in determining space and staff, but are not included in the licensed number. (per Child Care Policy Manual Glossary of Terms)

5.1.2 Does your State/Territory exempt any child care providers from its licensing requirements?

☑ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

Certain categories of child care providers that are exempt from licensure (including elementary schools, head start programs, and membership organizations) are regulated by other agencies (such as local school districts, private school accreditation bodies, Federal Office of Head Start, and membership organizations including YMCA) or are otherwise required to comply with certain health and safety measures issued by those agencies. For membership organizations such as the YMCA, the child care provider must be in good standing with the national membership organization in order to be exempt from licensure. The majority of child care providers who are exempt from licensure under Mississippi Law, but who are eligible for CCDF subsidy are family child care home providers who provide care for five or fewer non-related children. The Lead Agency will monitor this type of unlicensed provider (license exempt) to ensure compliance with health and safety standards, and the Lead Agency will not exempt relative caregivers from monitoring requirements. Additionally, all individuals over the age of 18 residing in a family child care home will be subject to background check requirements, and the Lead Agency will not exempt relative caregivers from background check requirements.

☐ No.

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

☐ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.

☑ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Substantially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Ratios and Group Sizes for licensed care are described in MS State Department of Health Policy (Regulations Governing Licensure of Child Care Facilities, Rule 1.8.2 and Rule 1.8.3).

Unmet requirement - Identify the requirement(s) to be implemented child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies regarding ratios and group size in unlicensed care settings in terms of the age of the children for each type of setting. This process will include examining national standards, recommendations, and best practices.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (for ratios and group sizes in unlicensed care settings) and negotiate agency approval within MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (for ratios and group sizes in

unlicensed care settings) to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's office, the Lead Agency will hold a 30-day public comment period regarding proposed policies for ratios and group sizes in unlicensed settings. During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process;

Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff (specifically monitors who will conduct annual inspections of unlicensed providers) on the new requirements for ratios and group sizes in unlicensed care settings. Training will be conducted in person and will include a field observation component.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will conduct trainings for unlicensed providers regarding new requirements for ratios and group settings. The training will prepare providers for their compliance during their next monitoring visit. Training will be offered in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement policy changes regarding ratios and group sizes for child care providers specific to the care setting. The Lead Agency will monitor unlicensed providers for compliance on an annual basis. The MS State Department of Health Division of Child Care Licensure will continue to monitor compliance in licensed care settings.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Human Services

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care

1. Infant
   - State/Territory age definition:

   Less than 1 year.
   - Ratio:

   5:1
   - Group Size:

   10

2. Toddler
   - State/Territory age definition:

   12 months to under 24 months
   - Ratio:

   9:1
   - Group Size:

   10

3. Preschool:

- State/Territory age definition:

2 through 4 years

- Ratio:

12:1 ratio for 2 year olds; 14:1 ratio for 3 year olds; 16:1 ratio for 4 year olds

- Group Size:

14 for 2 year olds; 14 for 3 year olds; 20 for 4 year olds

4. School-Age

- State/Territory age definition:

5 through 12 years

- Ratio:

20:1 ratio for 5-9 year olds; 25:1 ratio for 10-12 year olds

- Group Size:

20 for 5-9 year olds; 25 for 10-12 year olds

5. If any of the responses above are different for exempt child care centers, describe:

Not Applicable.

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.

In mixed age groups, the age of the youngest child in the group determines the staff to child ratio. Preschool children shall not be grouped with school age children in any single area during normal classroom and playground or water activities.

b) Licensed Group Child Care Homes:

1. Infant

- State/Territory age definition:

Less than 1 year.

- Ratio:

4:1

- Group Size:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2 http://msdh.ms.gov/msdhsite/_static/resources/799.pdf)

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

2. Toddler
   - State/Territory age definition:

12 months to under 24 months

- Ratio:

8:1

- Group Size:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2 http://msdh.ms.gov/msdhsite/_static/resources/799.pdf).

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

3. Preschool:
   - State/Territory age definition:

2 through 4 years

- Ratio:

12:1 ratio for 2 year olds; 14:1 ratio for 3 year olds; 16:1 ratio for 4 year olds

- Group Size:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2

http://msdh.ms.gov/msdhsite/_static/resources/799.pdf).

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

4. School-Age
   - State/Territory age definition:

5 through 12 years
   - Ratio:

20:1 for 5-9 year olds; 25:1 for 10-12 year olds
   - Group Size:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2 http://msdh.ms.gov/msdhsite/_static/resources/799.pdf).

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

Children related within the third degree are included in determining space and staff, but are not included in the licensed capacity.

6. If any of the responses above are different for exempt group child care homes, describe

Not applicable.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory

requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

The ratios are as follows:

4:1 ratio for Infants;

8:1 ratio for Toddlers;

12:1 ratio for 2 year olds;

14:1 ratio for 3 year olds;

16:1 ratio for 4 year olds

20:1 ratio for 5-9 year olds; and

25:1 ratio for 10-12 year olds.

Describe the group size:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2 http://msdh.ms.gov/msdhsite/_static/resources/799.pdf).

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

Describe the threshold for when licensing is required:

Licensing is required when the provider cares for six or more non-related children. Children are considered related within the third degree of kinship.

Describe the maximum number of children that are allowed in the home at any one time:

As allowed by the size of the room (See Child Care Regulations Rule 2.11.2 http://msdh.ms.gov/msdhsite/_static/resources/799.pdf).

Generally speaking, every license shall set forth the licensed facility's maximum licensed capacity, which shall be based upon a minimum of thirty-five (35) square feet of usable indoor space per child.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

Yes.

Describe the limits on infants and toddlers or additional school-age children that are

allowed for part of the day:

Not available.

2. If any of the responses above are different for exempt family child care home providers, describe

There are no defined ratios for children in unlicensed care settings. Unlicensed providers may only provide care for five or fewer non-related children. Children are considered related within the third degree of kinship.

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day.

Describe the ratios:

There are no defined ratios for unlicensed family child care homes.

Describe group size:

There are no defined group sizes for unlicensed family child care homes.

Describe the threshold for when licensing is required:

Licensing is required if the provider cares for six or more children that are not related within the third degree.

Describe maximum number of children that are allowed in the home at any one time:

Not available.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

There are no defined ratios for unlicensed family child care homes.

Describe the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

Not available.

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed,minimum education level, any specific content required related to the age of

children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential, or 3) three years documented experience.

and assistant teacher qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

2. Toddler lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant teacher qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

3. Preschool lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant teacher qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

4. School-Age lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant teacher qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

5. Director qualifications:

Any of the following: 1) A bachelor's degree 2) An Associate's degree plus 480 hours practical training 3) An Associate's degree plus two years experience 4) Two years experience plus Director's Credential

b) Licensed Group Child Care Homes:

1. Infant lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

2. Toddler lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

3. Preschool lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

4. School-Age lead teacher

Any of the following: 1) HS Diploma/GED 2) current CDA credential or 3) three years documented experience.

and assistant qualifications:

Must be 16 years of age and shall work under the direct supervision of a teacher.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

Family child care homes are exempt from licensure in MS but may voluntarily register with the MS State Department of Health and would be subject to the same personnel requirements as a licensed center. At this time, there are no licensed child care homes.

d) Other eligible providers qualifications:

In order to receive subsidy, license exempt family child care providers must be 18 years old, must submit to a Child Abuse and Neglect registry check, and must sign and adhere to Basic Health, Safety, and Nutritional Guidelines

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this

requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State certifies that it has health and safety requirements for individuals (providers) receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-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))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016.

Provide a citation and a link if available

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Substantially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

See licensure policies at the following link: http://msdh.ms.gov/msdhsite/_static/30,0,183,225.html.

See the DECCD policy manual at the following link: http://www.mdhs.ms.gov/early-childhood-care- development/child-care-policy-manual/.

1. Prevention and control of infectious diseases (including immunization)

MSDH Regulations Governing Licensure: Rule 1.23.13, Rule 1.24.6, MSDH Appendix I Communicable Diseases/Conditions and Return to Child Care

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 1, Item 3

2. Prevention of sudden infant death syndrome and use of safe sleeping practices

MSDH Regulations Governing Licensure: Rule 1.9.4 (5)

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

MSDH Regulations Governing Licensure: Rule 1.4.1 (4), Rule 1.5.1 (2b), Rule 1.6.3 (6), Rule 1.6.7 (3.a), Rule 1.12.1 (3.g), Rule 1.14.1

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

MSDH Regulations Governing Licensure: Rule 1.12.5 (7), Appendix C (IV Child Requiring a Special Diet)

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 15

5. Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic

MSDH Regulations Governing Licensure: Subchapter 10 (Equipment, Toys, and Materials), Subchapter 11 (Buildings and Grounds), Appendix D (Playground Safety Standards), Rule 1.4.1 (2.b), Subchapter 19 (Swimming and Water Activities)

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 7

6. Prevention of shaken baby syndrome and abusive head trauma

MSDH Regulations Governing Licensure: Rule 1.14.1

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 12

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-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))

MSDH Regulations Governing Licensure: Rule 1.2.2 (1.u - w), Rule 1.6.4 (1.g), Rule 1.24.8 (3), Rule 1.12.7, Rule 1.4.1 (4.e)

8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

MSDH Regulations Governing Licensure: Rule 1.16.3, Rule 1.23.12, Appendix H (Cleaning and Disinfection Procedures)

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 4, Item 6, Item 9

9. Precautions in transporting children (if applicable)

MSDH Regulations Governing Licensure: Subchapter 15 (Transportation)

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 13

10. First aid and cardiopulmonary resuscitation (CPR) certification

MSDH Regulations Governing Licensure: Rule 1.23.6

Basic Health, Safety, and Nutritional Assurances for Unlicensed Providers (CCPP Policy Manual Appendix H): Item 1

Unmet requirement - Identify the requirement(s) to be implemented Prevention of sudden infant death syndrome and use of safe sleeping practices

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene stakeholders via the SECAC to determine policy strategies for the prevention of SIDS in unlicensed care settings.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health and Nutrition Committee); MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (health and safety standards for the prevention of SIDS in unlicensed care settings) and negotiate administrative approval within MDHS leadership for those policies.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit suggested policies (health and safety standards for the prevention of SIDS in unlicensed care settings) to Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period on proposed policies regarding health and safety standards for the prevention of SIDS in unlicensed care settings. During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff (specifically monitors responsible for annual monitoring visits) on new health and safety requirements regarding the prevention of SIDS in unlicensed care settings. Training will be conducted in person and will include a field observation component.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train unlicensed childcare providers on the health and safety

standards specific to the prevention of SIDS. Training will prepare the providers to comply with new health and safety regulations during their next monitoring visit. Training will be provided in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes in the health and safety standards specific to the prevention of SIDS in unlicensed care settings. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, agency websites including the consumer education website, and online videos.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement health and safety standards regarding the prevention of SIDS in unlicensed care settings. Lead Agency monitors will inspect

unlicensed care settings for compliance with new health and safety regulations during annual monitoring visits.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Unmet requirement - Identify the requirement(s) to be implemented Administration of medication, consistent with standards for parental consent

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies and health and safety standards for the administration of medication in unlicensed care settings.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health and Nutrition Committee); MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies and standards for the administration of medication in unlicensed care settings. The Lead Agency will negotiate

administrative approval for these policy strategies among MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies regarding the administration of medication in unlicensed care settings to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding health and safety standards for the administration of medication in unlicensed care settings. During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff (specifically monitors responsible for annual inspections of unlicensed providers) on the new health and safety standards for the administration of medication in unlicensed care settings. Training will be conducted in person and will include a field observation component.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train unlicensed child care providers on changes in the health and safety standards regarding the administration of medication. The training will prepare the unlicensed providers for their next monitoring visit. Training will be offered in a variety of formats, including in-person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS

Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes in the health and safety standards regarding the administration of medication in unlicensed care settings. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, agency websites (such as the consumer education website), and online videos.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement changes in the health and safety standards regarding the administration of medication in unlicensed care settings. Lead Agency monitors will inspect unlicensed, CCDF-funded providers on an annual basis to ensure compliance with these standards.

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Not Applicable

Unmet requirement - Identify the requirement(s) to be implemented Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-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))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders via the SECAC to determine policy strategies for emergency preparedness in unlicensed care settings.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MEMA; Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies regarding emergency preparedness and response planning in unlicensed care settings. The Lead Agency will negotiate administrative approval for these policies within MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies, regarding emergency preparedness and response planning in unlicensed care settings, to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/01/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies for emergency preparedness and response planning in unlicensed care settings. During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff on the new requirements for emergency preparedness in unlicensed care settings. Monitors will be prepared to conduct annual inspections of unlicensed providers to ensure compliance. Training will be conducted in person.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train unlicensed providers on the new standards regarding emergency preparedness and response planning. The Lead Agency will support unlicensed providers in becoming compliant with new requirements prior to their next monitoring visit. Providers will be instructed on how to complete an emergency preparedness plan and will be given a template. Training will be provided in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Early Years Network; Community Colleges; Save the Children

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding emergency preparedness and response planning in unlicensed care settings. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, the consumer education website, and online videos.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement standards regarding emergency preparedness and response planning. The Lead Agency will monitor compliance within unlicensed care settings. The MS State Department of Health Division of Child Care Licensure will continue to monitor compliance with emergency preparedness standards in licensed care settings.

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented pre-service (prior to initial service) or orientation (period from when service started) appropriate to the provider setting that address each of the requirements relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to identify existing training resources and to determine policy strategies for training. Policy strategies will include the number of hours that will be required for licensed and unlicensed providers as well as acceptable curricula. The Lead Agency will also determine any credentials that would serve as a substitution for orientation training. The Lead Agency's goal is to identify training that is available in a variety of formats, including in-person and online training modules.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (regarding orientation training that is specific to the provider setting and that addresses health and safety topics) and negotiate administrative approval within MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Not applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding orientation training that is specific to the provider setting and that addresses health and safety topics) to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/01/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period for proposed policies (regarding orientation training that is specific to the provider setting and that addresses health and safety topics). During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process;

Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

After reviewing available training resources, the Lead Agency may develop an online system to support training as deemed necessary by the agency and its stakeholders. This process will include tracking of completed training.

Projected start date for each activity: 05/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train agency staff on new requirements regarding orientation training that is specific to the provider setting and that addresses health and safety topics. Training will cover procedures for monitoring compliance within licensed and unlicensed settings on an ongoing basis.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will offer orientation training (specific to the provider setting and that addresses health and safety topics) to providers. Current providers who are not yet compliant with new requirements will be supported in the completion of orientation training. The Lead Agency will clearly communicate a timeline for all current providers to achieve compliance. Providers who have certain credentials may be exempt from orientation requirements. Training will be offered in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize new policies regarding orientation training requirements that are appropriate to the provider setting and that cover health and safety topics. The Lead Agency will conduct targeted outreach to both licensed and unlicensed child care providers. The Lead Agency will use a variety of communication methods, including email, postings on websites (such as the consumer education website), and online videos. The Lead Agency will clearly communicate any credentials that would serve as a substitute for orientation training.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement changes (regarding orientation training that is specific to the provider setting and that addresses health and safety topics). The Lead Agency and the MS State Department of Health Division of Child Care Licensure will develop a system to monitor provider compliance with this requirement on an ongoing basis.

Projected start date for each activity: 09/01/2016

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; Early Years Network; Community Colleges

Unmet requirement - Identify the requirement(s) to be implemented ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the required topic areas

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to identify existing training resources and to determine policy strategies for ongoing training appropriate to the provider setting. Policy strategies will include the number of hours that will be required for licensed and unlicensed providers, as well as acceptable curricula.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (regarding ongoing training requirements appropriate to the provider setting) and negotiate administrative approval among MS Department of Human Services and the MS State Department of Health leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (regarding ongoing training requirements appropriate to the provider setting) to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies for the ongoing training of child care providers appropriate to the provider setting. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process;

Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Upon review of existing training resources, the Lead Agency may develop an online system to support ongoing training and the tracking thereof as deemed necessary by the agency and its stakeholders.

Projected start date for each activity: 05/01/2016
Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges; MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train MDHS agency staff on policies and procedures for provider training. Staff will be trained on how to monitor compliance

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will conduct trainings for child care providers (both licensed and unlicensed) to inform them about new ongoing training requirements and to support their compliance.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize new requirements for ongoing training appropriate to the provider setting. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, agency websites (such as the consumer education website), and online videos.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement changes regarding ongoing training requirements appropriate to the provider setting. The Lead Agency will work with partners to provide training opportunities that will fulfill the training requirement. The Lead Agency will work with the MS State Department of Health to track and monitor provider compliance with training requirements on an ongoing basis. The Lead Agency will monitor compliance within unlicensed care settings. The MS State Department of Health will continue to monitor compliance within licensed care settings.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory le agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; Early Years

Network; Community Colleges

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

☑ Nutrition (including age appropriate feeding).

Describe:

Prior to their approval for participation in the subsidy program, the Lead Agency requires all providers to complete a webinar training that details the rules and procedures of the CCDF program. As part of this training, providers are encouraged to provide nutritious meals and to participate in the CACFP.

☐ Access to physical activity.

Describe:

☐ Screen time.

Describe:

☐ Caring for children with special needs.

Describe:

☑ Recognition and reporting of child abuse and neglect.

Describe:

Prior to approval for participation in the subsidy program, the Lead Agency requires all providers to complete a webinar training that details the rules and procedures of the CCDF program. As part of this training, providers are informed of Child Abuse and Neglect Reporting Requirements and that individual caregivers are mandatory reporters.

☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.

Describe:

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements.

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

☐ Yes, all relatives are exempt from all health and safety training requirements.
If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

☐ Yes, some relatives are exempt from health and safety training requirements.
If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☑ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory shall have in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

☐ Yes.
The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The state has in effect annual inspection requirements for licensed providers. Inspections are conducted by the MS State Department of Health Division of Child Care Licensure.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies to ensure that providers and facilities for children receiving assistance comply with applicable health and safety requirements. This step will be achieved through Lead Agency monitoring of unlicensed providers. The Lead Agency will work with SECAC to develop inspection forms and correction action plan forms. Policy strategies will consider different monitoring approaches, whether or not visits should be unannounced, and how and when providers will be revisited to ensure corrective action.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will develop forms (including monitoring checklists and corrective action forms) for use in annual monitoring visits to be performed by Lead Agency monitors in license-exempt, CCDF-funded care settings.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee; MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies and develop practices to ensure that unlicensed providers comply with applicable health and safety requirements. The Lead Agency will negotiate administrative approval of these policies among MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS

Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (to ensure that unlicensed providers comply with applicable health and safety requirements) to the Secretary of State's office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies to ensure that unlicensed providers comply with applicable health and safety requirements. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will designate and/or hire monitors to perform annual inspections of license-exempt, CCDF-funded providers to ensure that unlicensed providers comply with applicable health and safety requirements. Lead Agency monitors will be trained on how to perform inspections. Training will be conducted in person and will include a field observation component.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will provide training (on new policies to ensure that unlicensed providers comply with applicable health and safety requirements) to unlicensed childcare providers to prepare them for upcoming annual monitoring visits. In order to decrease violations or findings, the training offered to providers will cover new health and safety requirements with which unlicensed providers will be expected to comply. Training will be delivered in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding policies and practices to ensure that unlicensed providers comply with applicable health and safety requirements. The Lead Agency will communicate with parents, providers, and key stakeholders through a variety of communication methods, including email, the consumer education website, and online videos.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement policies and develop practices to ensure that unlicensed providers comply with applicable health and safety requirements. The Lead Agency will develop procedures to allow annual monitoring as well as any

necessary follow-up visits. Lead Agency will conduct the monitoring visits. The Lead Agency will evaluate its efforts on an ongoing basis to ensure that all license-exempt, CCDF-funded providers are inspected according to agency policy and federal requirements.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

☑ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and

cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

Licensing inspectors are recognized as Health Program Specialists Senior under the MS State Personnel Board, and special qualifications for this position include 16 hours of college credit in early childhood. Newly hired licensing inspectors are placed on a strict training timeline that can take up to a year, and these inspectors are not allowed to conduct inspections until they are deemed competent by their supervisor. Licensing inspectors attend trainings on cultural diversity provided by the MS State Department of Health. Licensing Inspectors are trained on all regulations that are specific to the age of the child and provider setting, and the agency actively recruits candidates that have formal education in early childhood education.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

☑ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits

Rule 1.2.6 requires a pre-licensure inspection as well as unannounced inspections prior to annual renewal as required by state law (per Regulations Governing Licensure of Child Care Facilities: http://msdh.ms.gov/msdhsite/_static/resources/78.pdf).

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)**) - It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016) 11/19/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Not yet started

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented policies and

practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B))).

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies for monitors (employed by the Lead Agency) to perform annual monitoring visits of licensed-exempt, CCDF-funded providers. The Lead Agency will work with SECAC to develop inspection forms and correction action plan forms.

Policy strategies will consider differential monitoring approaches, whether or not visits should be unannounced, and how providers with findings will be revisited to ensure corrective action.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will develop forms (including monitoring checklists and corrective action forms) for use in annual monitoring visits to be performed by Lead Agency monitors in license-exempt, CCDF-funded care settings.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee); MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies regarding the annual monitoring of license-exempt, CCDF-funded providers. The Lead Agency will negotiate administrative approval of these policies among MDHS leadership.

Projected start date for each activity: 06/01/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies regarding annual monitoring of license-exempt, CCDF-funded providers to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/01/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies for annual monitoring of license-exempt, CCDF-funded providers. During this time, the Lead Agency will conduct a public hearing.

Projected start date for each activity: 07/01/2016

Projected end date for each activity: 07/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will designate and/or hire monitors to perform annual inspections of license-exempt, CCDF-funded providers. Lead Agency monitors will be trained on how to perform inspections. Training will be conducted in person and will include a field observation component.

Projected start date for each activity: 08/01/2016

Projected end date for each activity: 08/31/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will provide training to unlicensed childcare providers to prepare them for upcoming annual monitoring visits. In order to decrease violations or findings, the training offered to providers will cover new health and safety requirements with which unlicensed providers will be expected to comply. Training will be delivered in a variety of formats including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding the monitoring of license-exempt, CCDF-funded providers. The Lead Agency will communicate with Parents, Providers, and key stakeholders through a variety of methods, including email, the consumer education website, and online videos.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement changes necessary to conduct annual monitoring visits of license-exempt, CCDF-funded providers. The Lead Agency will develop procedures to allow annual monitoring as well as any necessary follow-up visits. Lead Agency will conduct the monitoring visits. The Lead Agency will evaluate its efforts on an ongoing basis to ensure that all license-exempt, CCDF-funded providers are inspected according to agency policy and federal requirement.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory le agency to complete implementation of this activity

Not Applicable

d) **Ratio of Licensing Inspectors**) - It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

☑ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors:

The MSDH has a benchmark of 50 facilities per licensed inspector; however, due to staffing, a ratios can be anywhere from 65:1 to 120:1 depending on the health district. Current ratios allow for every facility in the state to receive at least one annual inspectio as required by state law. The MSDH has set a goal of two annual inspections, and 90 percent of facilities in the state receive a second inspection.

☐ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities,

necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

e) **Child Abuse and Neglect Reporting** - That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

☐ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no

later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016) 09/30/2016

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Not yet started

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Unmet requirement - Identify the requirement(s) to be implemented child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i))

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Lead Agency will convene with stakeholders, via the SECAC, to determine policy strategies to strengthen existing child abuse and neglect reporting requirements. This process will include updating policy language and a provider statement of agreement.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 06/30/2016

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will integrate additional training regarding child abuse and neglect into the approval process for CCDF-funded providers. This process will include adding information to the director's training webinar, which is required by DECCD as part of the approval process for child care subsidies.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Child Protection Services

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft stronger policies regarding child abuse and neglect and will negotiate administrative approval for these policies among MDHS leadership.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 06/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies regarding child abuse and neglect to the Secretary of State's Office for approval.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/01/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed child abuse and neglect policies. During this time, the Lead Agency will hold a public hearing.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process; Provider Organizations.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Lead Agency staff will be trained on new policies regarding child abuse and neglect. Specifically, staff will be trained on how to support providers in their role as mandatory reporters. Training will be given in person to agency staff. Training specific to providers (licensed and unlicensed) may be offered in a variety of formats, including in person and online.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Child Protection Services

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize strengthened policies regarding child abuse and neglect reporting. The Lead Agency will communicate this information to parents and providers using a variety of methods, including emails, videos, posts on the consumer education website, and webinars.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement increased requirements and trainings related to child abuse and neglect reporting. The Lead Agency will support provider compliance with this requirement on an ongoing basis.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS

Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Child Protection Services

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☐ Yes, all relatives are exempt from all inspection requirements.

If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

☐ Yes, some relatives are exempt from inspection requirements.

If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☑ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories must have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as other adults in the household that may have unsupervised access to children. These provisions must be in place

no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.
Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.
Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.
Transparency - The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.
Appeals process - The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.
Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

5.3.1 Describe the status of the State/Territory's requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2017) 09/30/2017

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

- The MS Department of Health Division of Child Care Licensure conducts background checks on staff (including prospective staff) in licensed centers. This background check includes fingerprinting and a check of the child abuse and neglect registry.
- The Lead Agency conducts a state child abuse and neglect registry check on unlicensed providers and individuals residing in the provider's home with un-supervised access to children.

Unmet requirement - Identify the requirement(s) to be implemented. Requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC (with specific focus on the Mississippi State Department of Health), to determine policy and procedure strategies for comprehensive background checks in childcare settings (including licensed, regulated, or registered providers that receive CCDF funds) that meet all federal requirements.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 01/31/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies to conduct comprehensive background checks on all staff members and providers who are licensed, regulated, or registered and who receive CCDF funds. The Lead Agency will negotiate administrative approval for these policies among MS Department of Human Services and MS State Department of Health leadership. This process will include negotiating an agreement between MDHS and MSDH that will allow the agencies to conduct background checks on individuals who are operating in an unlicensed setting (only if that unlicensed provider receives CCDF funding). In unlicensed child care settings receiving CCDF funding, background checks will be expanded to include the caregiver and all members of their household over the age of 18.

Projected start date for each activity: 02/01/2017
Projected end date for each activity: 02/28/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Upon the advice of general counsel, the Lead Agency may conduct an economic impact analysis of proposed background check policies.

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit suggested policies (regarding comprehensive background checks in child care settings that receive CCDF funds) to the Secretary of State's Office. The filing of proposed policies may include an economic impact statement (upon the advice of general counsel).

Projected start date for each activity: 05/30/2017
Projected end date for each activity: 05/30/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Health

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission process to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies for comprehensive background checks in all CCDF-funded child care settings. During

this comment period, the Lead Agency will hold a public hearing.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Health

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC members will encourage participation in the public comment process;

Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Agency staff within the MS Department of Human Services and the MS State Department of Health will be trained on new policies (regarding comprehensive background checks for all CCDF-funded providers) as well as procedures for conducting the background checks. MDHS and MSDH agency staff will be trained on how to monitor compliance with this requirement.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS State Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train child care providers (including licensed and unlicensed providers that receive CCDF funds) of changes in the comprehensive background

check policy. Training may be delivered in a variety of formats, including video and in person. The Lead Agency will ensure that all providers are aware of the process for completing a background check and of the grace period to submit to a comprehensive background check if they have not already done so. The Lead Agency will support compliance with new requirements on an ongoing basis.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding comprehensive background checks for all CCDF-funded providers. Parents, Providers, and key stakeholders will be notified of the change using a variety of communication methods, including email, agency websites (such as the consumer education website), and videos.

Projected start date for each activity: 08/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Department of Health; SECAC; provider organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will implement requirements for licensed, regulated, and

registered providers who receive CCDF funds to submit to a comprehensive background check. The MS Department of Human Services and the MS State Department of Health will implement processes and procedures as necessary to complete background checks. The Lead Agency will establish a grace period for current providers to submit to a comprehensive background check if they have not already done so. The Lead Agency will support compliance with new requirements on an ongoing basis. The MS State Department of Health will monitor compliance in licensed settings. The MS Department of Human Services will monitor compliance in unlicensed settings.

Projected start date for each activity: 09/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health

Unmet requirement - Identify the requirement(s) to be implemented. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders via the SECAC, specifically the Mississippi State Department of Health, to determine policy and procedure strategies for comprehensive background checks in childcare settings that meet all federal requirements. Specifically, background check requirements must apply to all staff members with unsupervised access to children. For family childcare homes, individuals living in the household will be subject to this requirement as well.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 01/31/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Health, Mental Health, and Nutrition Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will draft policies (requiring comprehensive background checks of all staff members with unsupervised access to children) and negotiate administrative approval within MDHS and MSDH leadership. The Lead Agency will negotiate an agreement with the MS State Department of Health that will allow the agencies to conduct background checks on individuals who are operating in an unlicensed setting (however, only unlicensed providers who receive CCDF funding will be subject to this requirement). In CCDF-funded family child care home settings, all household members, as well as the caregiver, over the age of 18 must submit to a comprehensive background check.

Projected start date for each activity: 02/01/2017
Projected end date for each activity: 02/28/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Upon the advice of general counsel, the Lead Agency will conduct an economic impact analysis of requiring comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings.

Projected start date for each activity: 03/01/2017
Projected end date for each activity: 03/31/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Not Applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (requiring comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings) to the Secretary of State's Office for approval. The submission may include an economic impact statement, upon the advice of general counsel.

Projected start date for each activity: 05/30/2017
Projected end date for each activity: 05/30/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating

agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will have a 30-day public comment period regarding proposed policies that would require comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings. During the public comment process, the Lead Agency will hold a public hearing.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Agency staff with the MS Department of Human Services and the MS State Department of Health will be trained on new policies requiring comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings. Agency staff will be trained on the procedures for conducting comprehensive background checks for both licensed and unlicensed providers and members of their household. Agency staff will be trained on how to monitor compliance on an ongoing basis. Training will be conducted in person.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health, Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will train licensed and unlicensed, CCDF-funded childcare providers on the procedures for submitting to a comprehensive background check. Unlicensed family child care providers will be trained on policies and procedures regarding comprehensive background for all members of their household over the age of 18. Current providers (and included household members as required by policy) who have not submitted to a comprehensive background check will be instructed on the time they will have to comply with new requirements. These trainings for providers will be offered in a variety of formats, including in person and online as necessary.

Projected start date for each activity: 06/01/2017

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize changes regarding comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings. The Lead Agency will communicate with parents, providers, and key stakeholders using a variety of communication methods, including email, agency websites (such as the consumer education website), and online videos.

Projected start date for each activity: 08/01/2017

Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health; SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency, in collaboration with the MS State Department of Health, will implement changes regarding comprehensive background checks of all staff members with unsupervised access to children, including household residents over the age of 18 in family child care settings. The agencies will work together to establish procedures to conduct required background checks. The Lead Agency will monitor compliance annually within unlicensed care settings. The MS State Department of Health will monitor compliance within licensed care settings.

Projected start date for each activity: 09/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Unmet requirement - Identify the requirement(s) to be implemented. Ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Upon completion of the consumer education website and the promulgation of new policies regarding comprehensive background checks, the Lead Agency will work with the Mississippi State Department of Health to develop a communication plan

for sharing and posting information, thus ensuring the ongoing maintenance of the consumer education website.

Projected start date for each activity: 07/01/2017
Projected end date for each activity: 07/31/2017
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will post information regarding policies and procedures for conducting comprehensive background checks to the consumer education website. The Lead Agency will work with the MS State Department of Health to maintain the site and ensure that information posted on the site is current.

Projected start date for each activity: 08/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Unmet requirement - Identify the requirement(s) to be implemented. Includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via SECAC (with specific emphasis on the Mississippi State Department of Health), to determine procedures

and policy strategies to conduct initial and recurring background checks (at least once every five years) that comply with all federal requirements.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 01/31/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health, Division of Child Care Licensure; SECAC (specifically the Family Support Committee)

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency in collaboration with the MS Department of Health Division of Child Care Licensure will draft policies (to conduct initial and 5-year recurring background checks for providers and household members subject to the comprehensive background check requirement) and negotiate administrative approval within their respective agencies for those policy strategies.

Projected start date for each activity: 02/01/2017
Projected end date for each activity: 02/28/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will submit proposed policies (requiring initial and five-year recurring background checks for providers and household members subject to the

comprehensive background check requirement) to the Secretary of State's Office for approval.

Projected start date for each activity: 05/30/2017
Projected end date for each activity: 05/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Secretary of State's Office; MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

As part of the submission to the Secretary of State's Office, the Lead Agency will hold a 30 day public comment period regarding proposed policiesto conduct initial and 5-year recurring background checks for providers and household members subject to the comprehensive background check requirement. During this public comment period, the Lead Agency will hold a public hearing.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; SECAC members will encourage participation in the public comment process; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

In order to maintain and monitor background check records, the MS Department of

Human Services and the MS Department of Health Division of Child Care Licensure will update information technology systems as necessary to track the current status of caregiver background checks (to ensure that 5-year recurring background checks for providers and household members subject to the comprehensive background check requirement are conducted in a timely fashion).

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Childcare Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The MS Department of Human Services and the MS State Department of Health will train their respective employees on policies and procedures for conducting initial and five-year recurring background checks for providers and household members subject to the comprehensive background check requirement. Training will include procedures to monitor compliance on an ongoing basis. Training will be conducted in person.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS State Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency in collaboration with the MS State Department of Health Division of Child Care Licensure will publicize changes regardingnew requirements to conduct initial and 5-year recurring background checks for providers and household members subject to the comprehesive background check requirement. The Lead Agency will communicate with parents, providers, and key stakeholders utilizing a variety of communication platforms including email, agency websites including the consumer education website, and online videos.

Projected start date for each activity: 08/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; SECAC; Provider Organizations

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency and the MS State Department of Health Division of Child Care Licensure will implement changes to conduct initial and five-year recurring background checks for providers and household members subject to the comprehensive background check requirement. Both agencies will develop procedures to conduct the necessary background checks. The Lead Agency will monitor compliance within unlicensed care settings. The MS State Department of Health Division of Child Care Licensure will monitor compliance within unlicensed settings.

Projected start date for each activity: 09/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure

Unmet requirement - Identify the requirement(s) to be implemented. Conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC (with specific emphasis on the Mississippi State Department of Health and Mississippi Department of Public Safety), to determine strategies to conduct background checks in a timely manner (not to exceed 45 days) in order to comply with all federal requirements.

Projected start date for each activity: 03/24/2016
Projected end date for each activity: 01/31/2017
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee); MS State Department of Health; Division of Child Care Licensure; Department of Public Safety

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will develop strategies and establish an agreement with the Mississippi State Department of Health and third-party background-check vendor to conduct background checks (in a timely manner not to exceed 45 days) in order to comply with federal requirements.

Projected start date for each activity: 02/01/2017
Projected end date for each activity: 04/30/2017

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Childcare Licensure

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency and the MS State Department of Health will seek to establish agreements with surrounding states to conduct background checks (in a timely manner not to exceed 45 days) in order to comply with federal requirements.

Projected start date for each activity: 05/01/2017

Projected end date for each activity: 07/31/2017

Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; Surrounding States

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency along with the MS State Department of Health Division of Child Care Licensure will implement strategies to conduct background checks in a timely manner (not to exceed 45 days) and will seek to evaluate progress toward this goal on an on-going basis.

Projected start date for each activity: 08/01/2017

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity MS State Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

MS State Department of Health Division of Child Care Licensure; MS

Department of Public Safety

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

Describe:

The MS State Department of Health is responsible for background checks and ensuring that they are conducted in a timely manner. MSDH contracts with a third party, AD&S, INC., to maintain the database system. In order to protect the privacy of the prospective employee, a letter of nonsuitability, which does not contain any information about the nature of the disqualifying event, is sent to the provider. Only the prospective employee contains a copy of the rap sheet with the letter of nonsuitability, as MSDH is prevented by law from disclosing the rap sheet to the provider/prospective employer. In the letter of nonsuitability, the disqualified individual is given instructions on how to appeal the results of the background check. The disqualified individual is given 60 days to present documentation negating the disqualifying criminal event.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states

Describe:

Inter-state background check requests are referred to the appropriate law enforcement agency including the MS Department of Public Safety. The State will continue to update state policies and procedures in this area through full implementation of the new federal requirements for background checks.

5.3.4 Does the State have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

☑ Yes.

Describe:

Prior to sending the letter of nonsuitability, an MS State Department of Health agency attorney will review the rap sheet to determine if any of the disqualifying offenses contained therein can be dismissed due to reasonable cause (such as the nature of the offense and elapsed time since the offense with no additional offenses.

☐ No.

5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?

☐ Yes.

Describe:

☑ No.

5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?

☐ Yes, all relatives are exempt from all background check requirements.

☐ Yes, some relatives are exempt from the background check requirements. If the State /Territory exempts some relatives from background check requirements, describe which relatives are exempt. from which requirements (some or all).

Describe.

☑ No, relatives are not exempt from background checks.

5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.

Lead Agencies can report that no fees are charged if applicable:

Describe.

By law, the licensing agency is authorized to charge a fee that includes the amount required by the FBI as well as any necessary costs incurred by the licensing agency for the handling and administration of background checks (Miss Code Ann § 43-20-8). The fee charged for completing the background checks do not exceed the cost of processing and administration.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue:

Describe.

This information will be available on the consumer education website (see implementation plans at 2.3.1) upon finalizing the policy and procedure.

5.3.9 Does the Lead Agency release aggregated data by crime?

☐ Yes.

List types of crime included in the aggregated data:

☑ No.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a "career ladder" that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children's development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements 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 across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

6.1.1 Describe the status of the State's training and professional development requirements 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.

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.)

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☑ Fully implemented and meeting all Federal requirements outlined above. Describe

using 6.1.2 through 6.1.6 below.

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individualto build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:

☑ State/Territory professional standards and competencies.

Describe.

The Lead Agency (MDHS) provides scholarships to providers to obtain their CDA, the MS Directors Credential, National Directors Credential which is offered through the McCormick Institute and is equivalent to college courses. Providers can obtain college credit hours for an additional fee.

☑ Career ladder or lattice.

Describe.

The Lead Agency supports providers in moving through educational options available in the state. These options range from professional development to formal education. The Lead Agency specifically addresses parts of the career ladder described in this section. The Lead Agency provides training and technical assistance free of charge to all providers within the state. The Lead Agency provides scholarships to providers to obtain their CDA, the MS Directors Credential, National Directors Credential which is offered through the McCormick Institute and is equivalent to college courses. Providers can obtain college credit hours for an additional fee.

☑ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

The state has an academic articulation agreement in place between two and four year institutions. In addition, there are MOUs in place between two and four year career technical degree programs in which certain technical courses are transferred.

☐ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

☑ Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

The Lead Agency has in place a data system contract to hold all the data related to the early childhood education workforce including retention, professional development registries, and provider demographics (the WELS data system).

☑ Advisory structure that provides recommendations for the development, revision, and

implementation of the professional development system or framework.

Describe.

MDHS is appointed representation on the State Early Childhood Advisory Council, which convenes a number of representatives from public and private entities in the state involved in professional development efforts.

☑ Continuing education unit trainings and credit-bearing professional development.

Describe.

MDHS partners with a number of higher education institutions in the state to provide training and professional development.

Through a partnership with the Department of Education for professional development, child care providers may earn CEUs.

☑ State-approved trainings.

Describe.

MDHS partners with a number of higher education institutions in the state to provide training and professional development.

☑ Inclusion in state and/or regional workforce and economic development plans.

Describe.

Data is represented in the Work Force Development Task Force via the State Longitudinal Data System

☐ Other.

Describe.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC

Describe.

MDHS is a voting member on the State Early Childhood Advisory Council. Over the last year, MDHS has worked closely with the SECAC Professional and Workforce Development

Committee to develop programs like T.E.A.C.H in the state. MDHS also worked with the committee to refine and update articulation agreements in the state, as well as increase provider's access to professional development trainings.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements

Describe.

The training and professional development offered through higher education institutions is grounded in the State's early learning and developmental guidelines. As health and safety standards are revised and as social-emotional/behavioral and early childhood mental health intervention models are encouraged in order to reflect new federal requirements, the lead agency will continue to assess and revise the professional development system in order to incorporate the new requirements and to support the increased demand for training and technical assistance.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

Describe.

Every provider in the state has access to the services that are provided through MDHSs partnership with higher education institutions. The MS Band of Choctaw Indians has been an active participant in our provider trainings.

6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring

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 disabilities, and Native Americans, including Indians and Native Hawaiians.

Describe.

MDHS provides scholarships for providers to obtain an age specific (infant/toddler, preschool, school-age, special needs) CDA . MDHS contracts with the Institute of Disabilities Studies at the University of Southern Mississippi to provide trainings for providers to help enable them to identify children with special needs and provide appropriate care for those children. The MS Band of Choctaw Indians has been an active participant in these trainings.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☑ Financial assistance for attaining credentials and post-secondary degrees.

Describe.

Financial assistance for attaining credentials is provided through CDA scholarships.

☑ Financial incentives linked to education attainment and retention.

Describe.

Providers who participate in the QRIS have a financial incentive to pursue education because they can receive a higher CCDF reimbursement.

☐ Registered apprenticeship programs.

Describe.

☐ Outreach to high school (including career and technical) students.

Describe.

☐ Policies for paid sick leave.

Describe.

☐ Policies for paid annual leave.

Describe.

☐ Policies for health care benefits.
Describe.

☐ Policies for retirement benefits.
Describe.

☐ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services).
Describe.

☐ Other.
Describe.

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language.

Describe.

Resource and Referral Sites have resources available for parents and providers in a Spanish version. Also, the consumer education website is being converted to host a Spanish translation.

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

☑ Informational materials in non-English languages
☐ Training and technical assistance in non-English languages
☐ CCDF health and safety requirements in non-English languages
☐ Provider contracts or agreements in non-English languages
☐ Website in non-English languages
☑ Bilingual caseworkers or translators available

☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

☐ Other.

Describe.

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages

English and Spanish; Website available in Vietnamese.

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families.

Describe that training and technical assistance for providers

☑ No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Unmet requirement - Identify the requirement(s) to be implemented Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will convene with stakeholders, via the SECAC (with specific emphasis on the McKinney-Vento state coordinator housed in MDE), to identify existing training resources as well as organizations that can provide training in a variety of formats to providers on how to identify and serve homeless children and families.

Projected start date for each activity: 03/24/2016

Projected end date for each activity: 05/30/2016

Agency - Who is responsible for complete implementation of this activity

Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC (specifically the Family Support Committee); McKinney-Vento State Coordinator at the MS Department of Education

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Upon the review of existing training resources (specific to the identification of and support for homeless children and families), the state will develop training curricula

and resources as necessary to fulfill this requirement. The goal will be to provide training in a variety of formats in order to meet the needs of licensed and unlicensed child care providers across the state.

Projected start date for each activity: 06/01/2016
Projected end date for each activity: 07/31/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; McKinney-Vento State Coordinator at the Mississippi Department of Education; Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will incorporate trainings (specific to the identification and support for homeless children and families) into the larger professional development infrastructure.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Mississippi Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; McKinney-Vento State Coordinator at the MS Department of Education; Early Years Network; Community Colleges

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

The Lead Agency will publicize the availability of training and technical assistance

(specific to the identification of and support for homeless children and families) to providers (licensed and unlicensed providers) and families via the consumer education website, emails, and printed materials as necessary. MDHS staff as well as Homeless Referral Agents will be made aware of all training resources and opportunities.

Projected start date for each activity: 09/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity MS Department of Human Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SECAC; McKinney-Vento State Coordinator at the MS Department of Education; Early Years Network; Community Colleges; Provider Organizations

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

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☑ Yes, If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

The State uses longitudinal data surrounding quality ratings among providers across the state to determine the progress of quality improvement over time.

MDHS offers tiered technical assistance that is based on the provider's QRIS rating. QRIS ratings currently rely heavily on the Environmental Rating Scales, but the QRIS is currently in revision.

b) Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe:

Both quality and infant toddler set-aside funds are used for this activity.

☐ Other funds.

Describe:

c) Check which content is included in training and professional development activities. Check all that apply.

☑ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

The Early Learning Guidelines and the Environmental Rating Scales are used.

☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

MDHS conducts trainings on the Early Learning Guidelines: Social and Emotional Development. These trainings implement the practices of the Center for Social and Emotional Foundations of Early Learning (CSEFEL).

☑ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development.

Describe:

The Family Support program is a statewide program and uses the Nurturing Parenting curriculum to expand knowledge of appropriate practices to parents.

☑ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.

Describe:

MDHS uses the state approved Early Learning Guidelines for Infants and Toddlers and the Early Learning Standards for 3 and 4 year olds as a basis for the trainings conducted for providers. Technical Assistance on implementing the guidelines and standards in the classroom is offered as well.

☑ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.

Describe:

Each Child Care Resource & Referral Network site across the state has created directories that include services that are specific to the communities that they serve, including medical and mental health, family counseling, WIC, etc. Each community has access to localized child care director groups, family support navigators, and resources through the 82 County Extension offices. The Early Years Network works with Excel By 5 communities as well.

☑ Using data to guide program evaluation to ensure continuous improvement.

Describe:

Contracted partners submit monthly and quarterly reports to the Lead Agency. MDHS reviews these reports during planning new programs and improving current programs.

☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.

Describe:

☑ Caring for and supporting the development of children with disabilities and developmental delays.

Describe:

MDHS offers a professional credential to child care providers. This credential is

earned upon the completion of training designed to support inclusive and responsive classrooms for children with differing abilities.

☑ Supporting positive development of school-age children.

Describe:

MDHS offers training and technical assistance based on the SACCERS Environmental Rating Scale.

☐ Other.

Describe:

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

☐ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling

☑ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

☑ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☐ Other.

Describe:

MDHS offers CDA scholarships to cover the full cost of the program.

☐ No.

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?

States and Territories are encouraged to consult with Caring for our Children for best practices

and recommended time needed to address training hour requirements.

☑ Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

Owners, Directors, and Director Designees shall complete mandatory, pre-service courses in Child Care Regulations, Director Orientation, and Playground Safety, First Aid and CPR. These trainings are a total of 12 hours.

2) Number of on-going hours and any required areas/content

All child care staff are required to complete 15 contact hours annually.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

Owners, Directors, and Director Designees shall complete mandatory, pre-service courses in Child Care Regulations, Director Orientation, and Playground Safety, First Aid and CPR. These trainings are a total of 12 hours.

2) Number of on-going hours and any required areas/content

All child care staff are required to complete 15 contact hours annually.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

Owners, Directors, and Director Designees shall complete mandatory, pre-service courses in Child Care Regulations, Director Orientation, and Playground Safety, First Aid and CPR. These trainings are a total of 12 hours.

2) Number of on-going hours and any required areas/content

All child care staff are required to complete 15 contact hours annually.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

There is nothing to report at this time; however, the Lead Agency will require orientation training (covering CCDF policies and required health and safety topics) in order to comply with new federal requirements.

2) Number of on-going hours and any required areas/content

There is nothing to report at this time, but the Lead Agency will require ongoing

training to comply with new federal requirements.

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

☑ Fully implemented - as of March 1, 2016.

Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

MDHS offers business technical assistance including the CDA and Childcare As a Business training. Trainings along with technical assistance are also offered state wide using the Program Administration Scales. This includes practices related to all of the above mentioned. MDHS also offers financial management workshops which include basic and advanced financial management practices. Technical assistance which focuses on financial management practice is also offered.

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will 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, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State's early learning and development guidelines appropriate for children from birth to kindergarten entry.

☑ The State assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency

In July of 2015, the MS Department of Education revised the ELGs for 3-5 year olds. The Office of the Governor has plans to launch a revision process for the I&T ELGs.

☑ Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016)

Overall Status - Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with to complete implement this activity

6.3.2 Check for which age group(s) the State has established early learning and development guidelines:

☑ Birth-to-three

Provide a link:

Infants and Toddlers:

http://earlyyearsnetwork.msucares.com/system/files/website/ms_it_elgs.pdf

☑ Three-to-Five

Provide a link:

Three Year Olds: https://www.mde.k12.ms.us/docs/curriculum-and-instructions-library/early-childhood-early-learning-guidelines-3's-7-2-2015-sos-final.pdf?sfvrsn=2

Four Year Olds: https://www.mde.k12.ms.us/docs/curriculum-and-instructions-library/early-childhood-early-learning-guidelines-4's-3-31-2015-sos.pdf?sfvrsn=2

☐ Birth-to-Five

Provide a link:

☐ Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards).

Describe and provide a link:

☐ Other.

Describe:

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☑ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☑ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:

MDHS offers trainings to all center-based program, family home providers and Head Start centers that are developed with the state-approved Early Learning Guidelines for Infant and Toddlers and the Early Learning Standards for 3 and 4 year olds as the foundation. These trainings are designed to increase the provider's skill in implementing a curriculum within their learning environment that is aligned to the Early Learning Guidelines.

☑ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

MDHS has developed technical assistance lessons using the Infant Toddler Environment Rating Scales and the Early Childhood Environment Rating Scales which is currently the instruments used in the state Quality Rating and Improvement System.

☑ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:

Technical Assistance for implementing the state approved Early Learning Guidelines for Infant and Toddlers is offered by MDHS statewide.

☑ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

Technical Assistance for implementing the state approved Early Learning Guidelines for preschool-age children is offered by MDHS statewide.

☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

b) Indicate which funds are used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

both quality set-aside and infant-toddler set-aside

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

☑ Yes.

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)

2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)

3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

4) Improving the supply and quality of child care programs and services for infants and toddlers

5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)

6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

8) Supporting providers in the voluntary pursuit of accreditation

9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

10) 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, the quality set-

aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

The Lead Agency has reviewed current expenditures on quality and has assessed the need for quality investment in comparison with the revised purposes of the law, including the placement of more low-income children in high quality child care. The Lead Agency has access to multiple sources of information in order to set quality goals for the next triennium. The Lead Agency reviews in-house data on an on-going basis and CQI processes are engaged when assessing the monthly and quarterly reports. The Lead Agency also conducted a parent needs assessment in 2015 to gauge parent perceptions of the quality system. Additionally, provider feedback is gathered at each training offered through our quality system. The Lead Agency will also rely on external state sources such as the recent commissioned study on the state QRS by the Frank Porter Graham Research Center and the SECAC 8 city listening tour from providers on QRS feedback.

Upon review of these data sources, The Lead Agency has identified two overarching goals for quality improvement. The first goal is to support compliance with new state requirements for licensing, inspection, monitoring, training, and health and safety (as required by NPRM sections:98.41; 98.42; and 98.44) . The second goal is to continue to enhance our tiered QRIS system (as required by NPRM sections: 98.33(a)2(ii); 98.53(a)(3); and 98.71(a)(2)) and to support providers in the attainment of higher quality ratings, which is in line with the federal directive to increase the placement of low-income children in high quality child care.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

☑ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

  Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

  both quality set-aside and infant-toddler set-aside

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

  Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

  both quality set-aside and infant-toddler set-aside

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

  Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

  both quality set-aside and infant-toddler set-aside

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

both quality set-aside and infant-toddler set-aside

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

both quality set-aside and infant-toddler set-aside

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

The State provides limited funding for Technical Assistance for providers under Quality Stars

☐ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

both quality set-aside and infant-toddler set-aside

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

☑ Yes, the State/Territory has a QRIS operating State/Territory-wide.

Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available

The state QRIS is administered through the Quality Stars program. The state also has a version of the QRIS for in-home providers. A state-wide QRIS for School-age programs is also administered through MDHS's school-age program.

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide.

Provide a link, if available

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☑ Participation is voluntary

☐ Participation is mandatory for providers serving children receiving subsidy.

If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

☐ Participation is required for all providers

☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

☑ Supports and assesses the quality of child care providers in the State/Territory

☑ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

☑ Embeds licensing into the QRIS.

Describe:

The first level in the Quality Stars program incorporates alternate licensing standards and is the foundation for the additional quality levels included in the Quality Stars.

☑ Designed to improve the quality of different types of child care providers and services

☑ Describes the safety of child care facilities

☑ Addresses the business practices of programs

☑ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled

☑ Provides, to the maximum extent practicable, 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.

If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

A 2-Star program receives a 7 percent tuition subsidy bonus. A 3-Star program

receives a 17 percent tuition subsidy bonus. A 4-Star program receives a 22 percent tuition subsidy bonus. A 5-Star program receives a 25 percent tuition subsidy bonus.

☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

- ☑ Licensed child care centers
- ☑ Licensed family child care homes
- ☑ License-exempt providers
- ☑ Early Head Start programs
- ☑ Head Start programs
- ☐ State pre-kindergarten or preschool program
- ☑ Local district supported pre-kindergarten programs
- ☑ Programs serving infants and toddlers
- ☑ Programs serving school-age children
- ☑ Faith-based settings
- ☐ Other.

Describe:

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

Describe:

Evaluation of the state's progress in improving the quality of child care programs and services is measured by 1) the number of subsidy centers that participate in the Quality Stars program; 2) a "listening tour" that gathered qualitative feedback across the state directly from providers; 3) a review of providers' ratings histories; and 4) an external evaluation of Mississippi's Child Care Quality Stars Program conducted by the Frank Porter Graham Child Development Institute.

The Lead Agency has contracted with a consultant to review all QRIS evaluation material for the purpose of developing strategies for QRIS improvement. The role of the consultant is to coordinate with various early childhood stakeholders and gather their input on best practices for quality improvement.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and 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.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

☑ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

Under the Family Friend and Neighbor Care Program, providers are recruited to participate in workshops and technical assistance specific to family home care.

The Lead Agency coordinates with the SECAC to identify and leverage existing state pilot programs for these purposes. Currently, these efforts are fragmented across the state. The SECAC seeks to identify these efforts, share lessons learned, and begin to establish a connected conversation about how multiple efforts can share the goal of expanding community child care networks.

☑ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

The Early Years Network, through MDHS, offers trainings and technical assistance that are specific to providers caring for infants and toddlers. These trainings include these topics: Ages and Stages for infants and toddlers/Birth to Five Early Learning Guidelines for Infants and Toddlers, Social and Emotional Development, identifying and addressing special needs in infants and toddlers, developmentally appropriate practices for infant and toddlers, and creating appropriate environments that encourage learning for infants and toddlers.

All trainings are advertised on a quarterly calendar that is mailed to every licensed center across the state. The calendar is also available on line at www.earlyyearsnetworkms.org/resources, as well as on the EYN smart phone app. Trainings that are mandatory for QRIS are offered in each region at a minimum of every quarter. When there is an overflow of providers who are needing the mandatory trainings and they cannot get into the ones advertised on the calendar, the EYN will schedule and offer another series of those trainings specific to the region of need.

☐ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

☑ Providing coaching and/or technical assistance on this age group's unique needs from

Statewide networks of qualified infant-toddler specialists.

Describe:

Agency staff who are conducting trainings and technical assistance to providers caring for infant and toddlers are required to obtain an Infant/Toddler credential through MDHS.

☑ 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, through the Early Years Network (EYN), promotes referrals to First Steps for children under the age of 3 to access services entitled under part C of IDEA. The EYN partners with the Institute for Disability Studies at the University of Southern Mississippi to provide professional development for caregivers serving infants and toddlers with disabilities.

☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

☐ Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

☑ Developing infant and toddler components within the early learning and development guidelines.

Describe:

The State Department of Education has developed the Early Learning Guidelines, which focus on infant and toddler early learning and development practices to facilitate better outcomes for these age groups.

☐ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that

the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being.

Describe:

☐ Other.

Describe:

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency evaluates the number of providers participating in the professional credentialing process for caring with children with special needs. The Lead Agency also reviews the number of requests for on-site technical assistance for issues related to children with special needs to determine the need for additional education on topics related to care for this population. Overall quality improvement is assessed through the ITERS-R (Infant and Toddler Environmental Rating Scale-Revised) Assessment (pre- and post-tests).

The Lead Agency works through the SECAC to organize both qualitative and quantitative measures for providing a continuous feedback mechanism for the state. The feedback process benefits from SECAC's diverse membership of child care providers, researchers, policy makers, and advocates. The SECAC and all SECAC committees meet on a monthly basis.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system

☑ State/Territory has a CCR&R system operating State/Territory-wide.

Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

In July 2014, the Lead Agency consolidated all of its previously separate quality enhancement programs into a single system of services for child care providers and the families they serve. This single system of services includes 18 child care resource and referral sites across the state. CCR&R are open to the public and can be utilized as meeting spaces for provider groups. Parents and providers may check out books and materials and engage with early childhood experts who staff the centers. CCR&Rs are based in local community organizations, such and college campuses

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide.

Describe:

☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

In order to evaluate the state's progress relevant to this activity, the state will review the number of visitors at CCR&R sites; the number of resources checked out at the CCR&R lending libraries; and contacts that are made, including requests for information that come through the CCR&R sites or phone lines.

The Lead Agency works through the SECAC to organize both qualitative and quantitative measures for providing a continuous feedback mechanism for the state. The feedback process benefits from SECAC's diverse membership of child care providers, researchers, policy makers, and advocates. The SECAC and all SECAC committees meet on a monthly basis.

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?

Describe:

For all licensed providers in MS, the MS Department of Health Division of Child Care Licensure monitors to ensure compliance with health and safety standards. The Lead Agency uses a combination of documentation submitted by the provider as well as periodic monitoring/audit visits to ensure compliance for all provider types with Child Care Payment Program regulations. The Lead Agency also collects information from providers regarding training/professional development earned within a program year. All information related to these processes is uploaded into the Lead Agency's child care subsidy data system known as CCPS.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency will evaluate the state's progress in the measures relevant to this activity by reviewing the following information: licensing information, monitoring reports, and the number providers who have met training requirements.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

The Lead Agency can produce data reports using the CCPS system. The Lead Agency can also review the number of providers with 3- Star rating or higher in the QRIS.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency will evaluate the State's progress toward the goals relevant to this activity by reviewing the following information: enrollment numbers at quality rated centers, provider QRIS rating history (if applicable), and statewide provider access to training and TA services.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

☐ Yes, the State/Territory has supports operating State/Territory-wide.

Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide.

Describe:

☐ No, but the State/Territory is in the development phase

☑ No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

Not Applicable

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?

Please describe:

MDHS offers a tiered TA support system based on pre-assessment scores using the Environment Rating Scales (ERS). In addition, specialized technical assistance support is offered in nutrition/health, physical activities and development. The Environment Policy Assessment and Observation (EPAO) is utilized to collect data to assist teachers and directors in making positive changes.

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

Describe:

The Lead Agency will evaluate the state's progress toward goals relevant to this activity by reviewing the following information: number of training hours provided.

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

The state agencies Head Start, Ms. Department of Education, and MDHS are collaborating to provide a seamless transition between all programs concerning curriculum, assessments and communication. In addition, the state has a contract with Save the Children to provide continuous updated disaster related professional development to the state. The state continually provides disaster preparedness trainings to providers as well as provides Safe Spaces for Children in collaboration with Red Cross when needed. The Lead Agency is updating their data collection system to include information related to child care provider emergency preparedness and other health and safety issues related to child well-being.

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead

Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.

Describe:

In accordance with new requirements for 12 month eligibility, the Lead Agency no longer considers a parent's failure to report circumstantial changes (such as a change in income or occupation or educational enrollment) prior to 12 months as fraud, nor will the continued payment of subsidies to such a parent be considered an Error or an improper payment. Subsidy staff have been informed of this protocol and such cases are not referred to program integrity for investigation. Parents are welcome to report circumstantial changes prior to twelve months if those changes reduce their copay. Failure to report income or occupation at the time of application or redetermination is still considered fraudulent.

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements.

Check all that apply.

- [x] Issue policy change notices
- [ ] Issue new policy manual
- [x] Staff training
  - [x] Orientations
  - [x] Onsite training
  - [ ] Online training
- [x] Regular check-ins to monitor implementation of the new policies.

  Describe:

  The monitoring unit within DECCD conducts monthly, internal audits of case files in order to ensure that all staff comply with all policies and procedures.

☐ Other.

Describe:

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.

The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93).Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors").The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Describe:

The Lead Agency has in place subcontracts and subgrants with various entities to provide child care slots and quality initiatives. Subrecipients submit monthly reports to the Lead Agency. The Lead Agency reviews these regular reports and if the Lead Agency has a concern that there is a compliance issue, the Lead Agency may request an audit. Subrecipients demonstrate their willingness to comply with the grant or contract and all its requirements, including having appropriate accounting and internal control systems, by signing the grant or contract.

Subrecipients are monitored annually by the MDHS Division of Program Integrity in accordance with the regulations established for all entities engaged in contract services for

the Lead Agency. These regulations can be found in the MDHS subgrant/contract manual located at http://www.mdhs.ms.gov/publications/subgrantee-manual/. Annual monitoring of subrecipients by the MDHS Division of Program Integrity includes a review of eligibility processes and requests for payments to ensure adherence to state and federal policies. Any findings as a result of the monitoring are settled in accordance with the established policies in the MDHS Subgrant/Contract Manual.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

- [x] Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), 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))
- [ ] Run system reports that flag errors (include types)

  Describe:

- [x] Review of enrollment documents, attendance or billing records
- [x] Conduct supervisory staff reviews or quality assurance reviews
- [x] Audit provider records
- [x] Train staff on policy and/or audits
- [ ] Other.

  Describe:

- [ ] None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

- [x] Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), 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))
- [x] Run system reports that flag errors (include types)

  Describe:

  Transactional child care activity can easily be monitored and analyzed through CCPS. The system has the ability to run error reports that catch inaccuracies, including clients with active certificates who are coded as TANF or TCC but who do not exist in the TANF database. Also, the system can identify school-aged children who are receiving full-time certificates.
- [x] Review of enrollment documents, attendance or billing records
- [x] Conduct supervisory staff reviews or quality assurance reviews
- [x] Audit provider records
- [x] Train staff on policy and/or audits
- [ ] Other.

  Describe:

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory?

The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

- [ ] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount:

- [ ] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [ ] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [x] Establish a unit to investigate and collect improper payments.

  Describe:

  The Lead Agency has established a monitoring unit within DECCD. The Lead Agency also utilizes the Division of Program Integrity.

- [ ] Other.

  Describe:

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- [ ] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount:

- [ ] Coordinate with and refer to other State/Territory agency (e.g., State/Territory

collection agency, law enforcement)

- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [ ] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [x] Establish a unit to investigate and collect improper payments.

  Describe composition of unit below

  The Lead Agency has established a monitoring unit within DECCD to recover improper payments that are the result of administrative error. The Lead Agency also utilizes the Division of Program Integrity to recover improper payments that are the result of substantiated fraud.

- [ ] Other.

  Describe:

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and completion timelines:

c) Check which activities the Lead Agency will use for administrative error?

- [ ] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount:

- [ ] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [ ] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [x] Establish a unit to investigate and collect improper payments.

  Describe composition of unit below

The Lead Agency has established a monitoring unit within DECCD for this purpose.

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

☑ Disqualify client.

If checked, please describe, including a description of the appeal process for clients who are disqualified:

The Lead Agency will disqualify a client (through suspension or permanent disbarment) for program violations and substantiated fraud. Disqualified clients may request an agency hearing through written request to the Director of DECCD. After the hearing, the decision of the Director of DECCD shall be put in writing and shall be considered final. However, the decision of the Director can be appealed through a written request to the Director of the MS Department of Human Services.

☑ Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

The Lead Agency will disqualify a provider (through suspension or permanent disbarment) for program violations and substantiated fraud. Disqualified providers may request an agency hearing through written request to the Director of DECCD. After the hearing, the decision of the Director of DECCD shall be put in writing and shall be considered final. However, the decision of the Director can be appealed through a written

request to the Director of the MS Department of Human Services.

☑ Prosecute criminally

☐ Other.

Describe: