

Child Care and Development Fund (CCDF) Plan
For

Maryland
FFY 2014-2015

**PART 1
ADMINISTRATION**

1.1 Contact Information

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

1.1.1 Who is the Lead Agency designated to administer the CCDF program? Identify the Lead Agency and Lead Agency's Chief Executive Officer 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), §98.10)

Effective Date: 01-OCT-13

Name of Lead Agency: [Maryland State Department of Education](#)

Address of Lead Agency: [200 W. Baltimore Street, Baltimore, MD 21201](#)

Name and Title of the Lead Agency's Chief Executive Officer: [Lillian M. Lowery, State Superintendent](#)

Phone Number: [410-767-0462](#)

Fax Number: [410-333-0633](#)

E-Mail Address: llowery@msde.state.md.us

Web Address for Lead Agency (if any): www.marylandpublicschools.org

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.** (§§98.16(a) and (c)(1))

a) Contact Information for CCDF Administrator:

Effective Date: 01-OCT-13

Name of CCDF Administrator: [Elizabeth Kelley](#)

Title of CCDF Administrator: [Director, Office of Child Care](#)

Address of CCDF Administrator: [200 W. Baltimore Street, 10th Floor, Baltimore, MD 21201](#)

Phone Number: [410-767-7128](#)

Fax Number: [410-333-6226](#)

E-Mail Address: liz.kelley@msde.state.md.us

Phone Number for CCDF program information
(for the public) (if any):

Web Address for CCDF program
(for the public) (if any): www.marylandpublicschools.org

Web Address for CCDF program policy manual
(if any):

Web Address for CCDF program administrative rules
(if any):

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

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Address of CCDF Co-Administrator:

Phone Number:

Fax Number:

E-Mail Address:

Description of the role of the Co-Administrator:

1.2 Estimated Funding

1.2.1 What is your expected level of funding for the first year of the FY 2014 - FY 2015 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

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FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching): \$ [80,775,000](#)

Federal TANF Transfer to CCDF: \$ [0](#)

Direct Federal TANF Spending on Child Care: \$ [0](#)

State CCDF Maintenance-of-Effort Funds: \$ [23,301,407](#)

State Matching Funds: \$ [30,329,810](#)

Reminder - Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (\$98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

1.2.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)? Check all that apply.

Territories not required to meet CCDF Matching and MOE requirements should mark

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N/A here

Note: The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.
If checked, identify source of funds:

CCDF MOE and Match is met using state general funds appropriation (expenditure at MSDE & DHR) and the Pre-K expenditures methodology using the average State Aid per student (FTE).

If known, identify the estimated amount of public funds the Lead Agency will receive:

\$42,340,000

Private Donated Funds to meet the CCDF Matching Fund requirement. Only private received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:

donated directly to the State?

donated to a separate entity(ies) designated to receive private donated funds?

If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact and type:

If known, identify the estimated amount of private donated funds the Lead Agency will receive:

State expenditures for Pre-K programs to meet the CCDF Matching Funds requirement.

If checked, provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): 30%

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services:

Prekindergarten and child care services are coordinated through the efforts of the Governor's Early Childhood Advisory Council (ECAC).

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: **\$9,000,000**

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

Many Maryland elementary schools work collaboratively with qualified vendors to provide on-site before and after school child care for families requiring care for their child during the hours when school is not in session and during the summer months. School age child care is available at many locations in every Maryland jurisdiction.

State expenditures for Pre-K programs to meet the CCDF Maintenance of Effort (MOE) requirements.

If checked,

The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1).

Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): **20%**

If percentage is more than 10% of the MOE fund requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care:

Prekindergarten and child care services are expanded through the coordinated efforts of the statewide network of Judy Centers and local Memorandum of Agreement.

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: **\$4,660,281**

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents:

Collaborative policies are in place that allow children to be transported to and from the child care placement to the elementary public school program. Public school program hours provide services during the work hours that parents need care for their children.

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015. Note: Funding estimate is limited to FY 2014 In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

Estimated Amount of CCDF Quality Funds For FY 2014	Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available)	Purpose	Projected Impact and Anticipated Results (if possible)
Infant/Toddler Targeted Fund \$1,501,000	Maryland Family Network Infant/Toddler Expansion Maryland Child Care Credential (Professional Development, Quality Rating and Improvement System)	Implement a statewide infant and toddler specialist network Increase number of infant and toddler child care slots available. Scholarships for college coursework leading to a degree in Early Childhood Education or a related field. Support for on-going training through reimbursement and underwriting costs for specialized training.	Providers will access training and technical assistance to improve infant and toddler care and compliance with state regulations. More infant/toddler slots will be available in licensed child care facilities. Child care providers will have the knowledge and skills to provide age appropriate, quality environments, activities and interactions. Child care providers participating in the Maryland Credential will meet higher standards as defined by the core of knowledge requirements
School-Age/Child Care Resource and Referral Targeted Funds \$224,000	Maryland Family Network	Provide training and technical assistance to child care providers.	Parents will make better informed decisions when placing their children in care Providers will access training and technical assistance to improve compliance with state regulations, interactions with families and children and child care environment resulting in better outcomes for staff, children and families.

<p>Quality Expansion Targeted Funds \$ 2,360,000</p>	<p>Medically Fragile Child Care</p> <p>Maryland Child Care Credential (Professional Development, Quality Rating and Improvement System)</p> <p>Emergency Preparedness Training for Child Care Providers</p>	<p>Support environments and care for children with disabilities, increasing the number of child care slots available and quality of services provided.</p> <p>Implement changes to Credentialing requirements to align with the revised Quality Rating and Improvement System, Maryland EXCELS.</p> <p>Provide training and technical support services to licensed child care centers, registered family child care providers and informal providers on the development and implementation of emergency preparation plans.</p>	<p>Children with disabilities will receive child care services and there will be an increase in the availability of quality child care services for those children.</p> <p>Child care providers will have the knowledge and skills to provide age appropriate, quality environments, activities and interactions.</p> <p>Child care providers will develop an understanding of sheltering/sheltering in place, alternate site selection/preparation in the event of evacuation and emergency transportation requirements, key items for emergency kits, developing crisis communication plans, preparing inclusion plans for children and/or staff with special needs, etc.</p>
<p>Quality Funds (not including Targeted Funds) \$5,780,000</p>	<p>Staffing and inspection</p> <p>Curriculum Project</p> <p>Maryland Family Network</p> <p>Program Accreditation</p>	<p>Support required inspections to determine compliance with state regulations for child care, fire and local health requirements.</p> <p>Provide funding for programs to purchase state approved curriculum.</p> <p>The Maryland Family Network maintains a statewide network of 13 locations that work with child care providers and parents.</p> <p>Provide support to help programs attain and maintain accreditation.</p>	<p>Child care programs are inspected timely to determine on-going compliance in meeting state regulations and requirements for fire and health.</p> <p>Programs will improve the quality of the learning environment for children and their interactions with parents, resulting in better outcomes for all children.</p> <p>Parents will make better informed decisions when placing their children in care and providers will be better prepared to offer quality child care environments.</p> <p>Providers will have support through the process of accreditation resulting in an increase in the number of accredited programs and better outcomes for children.</p>

1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

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- No, the Lead Agency will not distribute any quality funds directly to local entities
- Yes, all quality funds will be distributed to local entities
- Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities

Other.
Describe:

1.3 CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place. The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

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Describe:

The overall internal control process for administration of CCDF Funds is described in the Internal Control and A-133 Combined Risk Assessment document developed and implemented by the Lead Agency's Division of Early Childhood Development. Guidance is provided within the document so that:

Transactions are properly recorded and accounted for to:

- Permit the preparation of reliable financial statements and Federal reports;
- Maintain accountability over assets; and
- Demonstrate compliance with laws, regulations, and other compliance requirements;

Transactions are executed in compliance with:

- Laws, regulations, and the provisions of contracts or grant agreements that could have a direct and material effect on a Federal program; and
- Any other laws and regulations that are identified in the compliance supplements; and
- Funds, property, and other assets are safeguarded against loss from unauthorized use or disposition.

The characteristics of internal control are presented in the context of the components of internal control discussed in Internal Control-Integrated Framework (COSO Report), published by the Committee of Sponsoring Organizations of the Treadway Commission. The COSO Report provides a framework for organizations to design, implement, and evaluate control that will facilitate compliance with the requirements of Federal laws, regulations, and program compliance requirements. Statement on Auditing Standards No. 78 (SAS 78), Consideration of Internal Control in a Financial Statement Audit, issued by the Auditing Standards Board of the American Institute of Certified Public Accountants (AICPA) and a related AICPA audit guide, Consideration of Internal Control in a Financial Statement Audit, incorporate the components of internal control presented in the COSO Report.

Characteristics of internal control are described relating to each of the five components (Control Environment, Risk Assessment, Control Activities, Information and Communication, and Monitoring) that should reasonably assure compliance with the requirements of Federal laws, regulations, and program compliance requirements. A description of the components of internal control and examples of characteristics common to the 14 types of compliance requirements are included in the Internal Control and A-133 Combined Risk Assessment document. Objectives of internal control and examples of characteristics specific to each of 13 of the 14 types of compliance requirements are also included.

The 13 compliance requirements outlined with objectives for internal controls include the following:

- Activities Allowed or Unallowed
- Allowable Costs/Cost Principles
- Cash Management
- Davis-Bacon Act
- Eligibility
- Equipment and Real Property Management
- Matching, Level of Effort, Earmarking
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- Period of Availability of Federal Funds
- Procurement/Suspension/Debarment
- Program Income
- Real Property Acquisition and Relocation Assistance
- Reporting
- Subrecipient Monitoring
- Special Tests and Provisions

Child Care Subsidy: Under a MOU the Department of Human Resources has responsibility for determining eligibility for child care subsidy. The Office of Child Care – Subsidy Branch monitors case records in local departments of social services once during an 24- month cycle to determine if they are in compliance with State and federal regulations. To monitor the cases, MSDE staff conduct an entrance conference to explain the procedures and goals of the review. An exit conference is also conducted to share the informal findings of the review with staff. The data is compiled from the review into a formal

written report and sent to the local department. The local department must correct the errors or deficiencies in the cases within 30 days and return a document to MSDE with the results. If the results show a significant need for improvement, MSDE works with the local department to draft and implement a corrective action plan. In addition to assisting with the implementation of the changes, MSDE organizes and conducts training and/or technical assistance that focuses specifically on the local department's needs.

Services and resources for assisting parents locating care are provided through a competitive bid process. Currently awarded to the Maryland Family Network, these contracts are monitored by MSDE grant management staff to ensure that contract standards and reporting requirements are met. Regular reports are submitted, reviewed and evaluated.

1.3.2. Describe the processes the Lead Agency will use to monitor all sub-recipients. 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. (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. OMB Circular A-133 Section 210 provides additional information on the characteristics of a **sub-recipient and vendor** (http://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2010). The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

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Describe:

All grants, contracts, and interagency agreements are established through written proposals that are reviewed for content and deliverables. All grants, contracts and interagency agreements are monitored by an assigned Division of Early Childhood Development staff person, based upon the terms of the grant/contract. All are subject to reporting requirements, to include deliverables, financial reports and progress in meeting contract requirements. Interim and final reports are required for all grants/contracts.

Monitoring includes the review of:

- Program progress reports, invoices and documentation to ensure accurate billing and that the budget is within contract guidelines;
- Statistical data to meet contract/grant requirements, such as the number of training sessions held, attendance records for training sessions, satisfaction survey results, pre and post-testing results, and child and/or program improvement documentation, as applicable and
- Contract/grant deliverables and expenditure data with applicable Documentation. The agency reviews invoices, policies and procedures to ensure compliance in accordance with the requirements of the grant/contract.

If determined necessary, a site visit will determine compliance based upon general program standards and documentation determined by specific grant/contract requirements.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart 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 (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

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Type of Activity	Identify Program Violations	Identify Administrative Error
Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid))	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Run system reports that flag errors (include types)	<input type="checkbox"/>	<input type="checkbox"/>
Review of attendance or billing records	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Audit provider records	<input type="checkbox"/>	<input type="checkbox"/>
Conduct quality control or quality assurance reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct supervisory staff reviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conduct data mining to identify trends	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Train staff on policy and/or audits	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other. Describe 	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>

For any option the Lead Agency checked in the chart above other than none, please describe:

Monitoring visits are conducted and records are pulled and reviewed.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error? Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and 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 (98.60(i)).**

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Strategy	UPV	IPV and/or Fraud	Administrative Error
Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount: \$ 1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe: Office of the Inspector General and/or Office of the Attorney General	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recover through repayment plans	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Reduce payments in the subsequent months	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recover through State/Territory tax intercepts	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recover through other means. Describe:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Establish a unit to investigate and collect improper payments. Describe composition of unit:

Office of the Inspector General, Maryland Child Care Subsidy Payment Processing and local departments of social services.



Other. Describe:



An overpayment of child care services creates a debt owed to the Department. An overpayment can occur when: (a) either a recipient or provider submits false information, (b) a change occurs during the certification period and it is not reported timely, or (c) an agency error is made. The debt must be collected no matter whom caused the overpayment. Any suspected fraud must be referred for investigation and possible prosecution.

Overpayments that result from the provider's failure to correctly report absences, dates of closure, or their rates, are recovered from the provider. The child care provider must repay the overpayment in full or in installments, or have it deducted as a recoupment in agreed upon installments from the subsequent child care payments. An agreement is signed by the provider prior to beginning collections.

Overpayments that result from the customer's failure to report changes in the family's circumstances are recovered from the customer. The customer must repay the overpayment in full or in monthly installments based on a mutual written agreement which is signed by the customer.

Overpayments that result from an agency error must be collected from either the customer, if the error benefits the customer, or the provider, if the error benefits the provider. Overpayments that benefit both the

customer and the provider should be divided in two and half applied to each party.

When the local department of social services identifies an overpayment, they contact the Maryland Child Care Subsidy Payment Processing (MDCCSPP) center who enters the information into CCATS. At that point, the first Notification of Overpayment letter is sent to the provider or customer. They have 30 days to respond and contact MDCCSPP to make arrangements for repayment. If they do not respond, a second and third notification letter is sent. If there is still no response, MSDE Accounting refers the case for collection.

Recovery then takes the form of a repayment or by deduction of continuing child care benefits. If an overpayment is recovered incrementally, it shall be recovered at a monthly rate of 10% of the overpayment for cases not involving fraud or 20 % of the overpayment for cases involving fraud.

None

For any option the Lead Agency checked in the chart above other than none, please describe:

The State has repayment policies and protocols in place.

1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

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None

Disqualify client.

If checked, please describe, including a description of the appeal process for clients who are disqualified

If fraud is suspected for a customer, the local department or the DHR Office of the Inspector General must obtain proof and share the findings with the customer. The customer is then presented either in writing or in person with an OIG 7 waiver form which allows the customer to sign the form and admit to offering misleading information, which allows them to avoid the hearing process. If the customer chooses not to sign the waiver within 10 days, the case is automatically referred to the Office of Administrative Hearings on the customer's behalf to be heard by an Administrative Law Judge (ALJ). The ALJ will schedule the hearing, review the case and render a decision.

If fraud is substantiated for a customer, the local department shall send written notice of 5 days adverse action. Sanctions are: for the first violation, a customer may not receive any Child Care Services for 6 months from the date payment was denied or until full restitution is made, whichever is earlier. For the second violation, the customer may not receive any Child Care Services for 12 months from the date the payment was denied or until full restitution is made, whichever is earlier. For the third violation, the customer shall be permanently barred from receiving Child Care Services and shall pay restitution.

Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified

If fraud is suspected for a provider, the local department or the DHR Office of the Inspector General must obtain proof and share the findings with the provider. The provider is then presented either in writing or in person with an OIG 7 waiver form which allows the provider to sign the form and admit to offering misleading information, which allows them to avoid the hearing process. If the provider chooses not to sign the waiver within 10 days, the case is automatically referred to the Office of Administrative Hearings on the provider's behalf to be heard by an Administrative Law Judge (ALJ). The ALJ will schedule the hearing, review the case and render a decision.

If fraud is substantiated for a provider, the local department shall send written notice of 5 days adverse action. Sanctions are: for the first violation, a provider may not receive any Child Care Services for 6 months from the date payment was denied or until full restitution is made, whichever is earlier. For the second violation, the provider may not receive any Child Care Services for 12 months from the date the payment was denied or until full restitution is made, whichever is earlier. For the third violation, the provider shall be permanently barred from receiving Child Care Services and shall pay restitution.

Prosecute criminally

Other.

Describe.

1.3.6 Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take

to reduce identified errors in the table below. Territories not required to complete the Error Rate Review should mark

N/A here

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Activities identified in ACF-402	Cause/Type of Error (if known)	Actions Taken or Planned	Completion Date (Actual or planned) (if known)
Missing information and income miscalculations	<p>Missing information or signatures in case record which leads to audit and review findings.</p> <p>Miscalculations of income and child support which leads to incorrect voucher amount.</p>	<p>We provide training and technical assistance to all staff involved with these systems. Case reviews and monitoring are conducted in the local departments of social services on a 24-month cycle. Data collected from these reviews and compliance rates are used to identify the areas that require ongoing training and technical assistance.</p>	<p>A report of findings on the reviews is compiled that identifies deficiencies or errors in authorizations of the child care subsidy and is sent to the local department. Identified cases must be reviewed again by the local department and corrected where possible within 30 days of the review. The MSDE staff offers training and technical assistance. MSDE randomly checks to verify that the corrections were made. If the case review reflects a large number of issues, a recommendation for formal policy training through MSDE or CCATS training through DHR is also made. Further, the local department is required to submit a corrective action plan.</p> <p>Although MSDE and DHR have a working relationship, MSDE does not have managerial authority over the case management staff in the local departments of social services.</p>

1.4 Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

Definition: *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

1.4.1 Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

Agency/Entity	Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan
<p><input checked="" type="checkbox"/></p> <p>Representatives of general purpose local government (required)</p> <p>This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies.</p>	<p>Through membership on the Office of Child Care (OCC) Advisory Council, by statutory requirement, representatives of local government participate and provide recommendations to the Office of Child Care on the CCDF Plan.</p> <p>Through the State’s Advisory Council on Early Childhood Education and Care, a broad range of state stakeholders, including local government, work to establish and coordinate services across programs for low income families with young children. Some of the services promoted include improving early literacy for disadvantaged children and meeting early childhood mental health needs. The Council is overseeing the implementation of Maryland’s Race To The Top Early Learning Challenge Grant.</p>
<p>For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan.</p>	
<p><input checked="" type="checkbox"/></p> <p>State/Territory agency responsible for public education</p> <p>This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.</p>	<p>The Maryland State Department of Education (MSDE), is the lead agency for the administration of the CCDF. Through membership on the OCC Advisory Council, by statutory requirement, representatives of public education make recommendations to the Office of Child Care on the CCDF Plan. The Office is a regular participant in meetings of the Maryland Higher Education Commission, The Deans and Directors of Two and Four Year Colleges and The Maryland Consortium of Two and Four Year Colleges where additional consultation on the CCDF plan is obtained.</p>

<input checked="" type="checkbox"/> <p>State/Territory agency responsible for programs for children with special needs</p> <p>This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs</p>	<p>The MSDE, Division of Special Education is represented on the OCC Advisory Council.</p>
<input type="checkbox"/> <p>State/Territory agency responsible for licensing (if separate from the Lead Agency)</p>	
<input checked="" type="checkbox"/> <p>State/Territory agency with the Head Start Collaboration grant</p>	<p>The Office of Child Care consults with and includes the MSDE, Division of Early Childhood Development Branch Chief for Head Start Collaboration on the OCC Advisory Council. The OCC Advisory Council, by state statute, includes representation from Head Start and consultation on the CCDF Plan is solicited.</p>
<input checked="" type="checkbox"/> <p>Statewide Advisory Council authorized by the Head Start Act</p>	<p>The State Advisory Council on Early Childhood Education and Care consists of Governor appointed representatives from State and local agencies and organizations, including the State Child Care Administrator who obtains additional consultation.</p>
<input checked="" type="checkbox"/> <p>Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services</p>	<p>Through membership on the OCC Advisory Council, by statutory requirement, representatives of public education make recommendations to the Office of Child Care on the CCDF Plan.</p>
<input checked="" type="checkbox"/> <p>State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)</p>	<p>The Maryland State Department of Education, Community Nutrition Programs Branch administers the CACFP. The Office of Child Care collaborates with and seeks consultation from the Community Nutrition Programs Branch on the CCDF Plan</p>
<input checked="" type="checkbox"/> <p>State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant</p>	<p>A representative of the Department of Health and Mental Hygiene, responsible for implementing the Home Visitation programs grant, serves on the OCC Advisory Council.</p>

<input checked="" type="checkbox"/> State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health)	Through membership on the OCC Advisory Council, by statutory requirement, representatives of the Maryland Department of Health and Mental Hygiene make recommendations to the Office of Child Care on the CCDF Plan. The Office of Child Care serves on the State Interagency Coordinating Council for Infants and Toddlers, the State's Early Childhood Mental Health Steering Committee, Inclusive Child Care Workgroup, and the Healthy Child Care Maryland Workgroup where consultation is received on the CCDF Plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for child welfare	Through membership on the OCC Advisory Council, by statutory requirement, a representative of the Maryland Department of Human Resources makes recommendations to the Office of Child Care on the CCDF Plan.
<input type="checkbox"/> State/Territory liaison for military child care programs or other military child care representatives	Military child care programs are exempt from licensing and therefore not consulted on the development of the plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for employment services/workforce development	The Maryland Department of Business and Economic Development (DBED) is represented on the OCC Advisory Council, as mandated by statute, and makes recommendations to the Office of Child Care on the CCDF Plan.
<input checked="" type="checkbox"/> State/Territory agency responsible for Temporary Assistance for Needy Families (TANF)	The Maryland Department of Human Resources (DHR) is responsible for administering TANF services. MSDE and DHR have developed a Memorandum of Understanding (MOU) that stipulates that DHR continues to determine eligibility for child care subsidy services
<input type="checkbox"/> Indian Tribes/Tribal Organizations <input checked="" type="checkbox"/> N/A: No such entities exist within the boundaries of the State	N/A
<input type="checkbox"/> Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21	These organizations are not consulted.

<input checked="" type="checkbox"/> Provider groups, associations or labor organizations	Maryland Association for the Education of Young Children, Maryland State Child Care Association, Maryland State Family Child Care Association, Maryland School Age Child Care Alliance and Service Employees International Union (SEIU) are represented on the OCC Advisory Council.
<input type="checkbox"/> Parent groups or organizations	These organizations are not consulted.
<input checked="" type="checkbox"/> Local community organization, and institutions (child care resource and referral, Red Cross)	Local Child Care Resource and Referral Agencies and United Way of Central Maryland are represented on the OCC Advisory Council.
<input checked="" type="checkbox"/> Other	Representative of Two and Four-Year Colleges serve on the OCC Advisory Council.

1.4.2. 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), §§98.14(C)). At a minimum, the description should include:

Effective Date: 01-OCT-13

a) Date(s) of notice of public hearing: [04/18/2013](#)

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

b) How was the public notified about the public hearing? [The Notice of the Public Hearing was posted on the MSDE website, and e-mailed to contractors, advocates, stakeholders, other interested parties and child care providers in our system.](#)c) Date(s) of public hearing(s): [05/16/2013](#)

Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).

d) Hearing site(s) [Maryland State Department of Education, 200 W. Baltimore Street, Conference Room 6, 8th Floor, Baltimore, MD 21201](#)

e) How was the content of the Plan made available to the public in advance of the public hearing(s)? [The plan was posted on the MSDE website and sent to stakeholders via email. A draft copy of the plan was posted on the MSDE website and sent electronically to the Office of Child Care Advisory Council, contractors, advocates, providers and other interested parties. Draft copies of the State Plan were distributed at the May 16, 2013 Office of Child Care Advisory Council meeting for review and comments. Members were encouraged to share the summary with their constituents and partners and forward comments to MSDE.](#)

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? [The information provided by the public is recorded, categorized, summarized and presented to Lead Agency representatives to inform the provision of child care services under the plan.](#)

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing. For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.

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The Office of Child Care provided wide dissemination of the Plan through email, the MSDE website, OCC Advisory Council membership and provider groups and organizations.

1.5. Coordination Activities to Support the Implementation of CCDF Services

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

Definition - Coordination involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of how governments are organized for each State are provided at: http://www2.census.gov/govs/cog/all_ind_st_descr.pdf.

1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

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Agency/Entity (check all that apply)	Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services	Describe the goals or results you are expecting from the coordination
		Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.

<p>Representatives of general purpose local government</p> <p>This may include, but is not limited to:</p> <p><input checked="" type="checkbox"/> representatives from counties and municipalities, local education representatives, or local public health agencies.</p>	<p>By statutory requirement, representatives of local government participate in the OCC Advisory Council. Through the State's Advisory Council on Early Childhood Education and Care, a broad range of state stakeholders, including local government, work to coordinate services across programs for low income families with young children. Some of the services promoted include improving early literacy for disadvantaged children and meeting early childhood mental health needs. The Council is overseeing the implementation of Maryland's Race To The Top Early Learning Challenge Grant.</p>	<p>Parent access to quality early education and care, coordination of services across a wide variety of programs, continued growth in school readiness especially among groups with the lowest school readiness scores.</p>
<p>State/Territory agency responsible for public education (required)</p> <p>This may include, but is not limited to,</p> <p><input checked="" type="checkbox"/> State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21st Century Community Learning Centers), or higher education.</p>	<p>The Office of Child Care is within the Maryland State Department of Education and is a participant in regular meetings of the Maryland State Department of Education (MSDE), Maryland Higher Education Commission, the Deans and Directors of Two and Four Year Colleges, the Maryland Consortium of Two and Four Year Colleges, the Maryland School-Age Child Care Alliance and the MSDE Early Learning Branch. These organizations are represented on the OCC Advisory Council. Staff members from the OCC serve on committees and workgroups with the State's public education agencies and organizations.</p> <p>The Office of Child Care coordinates with the Early Learning branch and all other branches in the Division of Early Childhood Development to ensure our progress toward consistent goals and to provide training and services across all programs.</p>	<p>Increased collaboration and partnership between early childhood and local school systems. Coordination of services and training across Department of Education divisions to meet statewide goals for quality improvement in early childhood and school readiness.</p> <p>Increase the number of child care providers with college degrees in early childhood education. The Strategic Plan of MSDE's Division of Early Childhood Education can be found at http://www.marylandpublicschools.org/MSDE/divisions/child_care/planning.</p>

<input checked="" type="checkbox"/>	<p>Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (required)</p>	<p>The Maryland State Department of Education (MSDE) is the lead agency for the administration of the CCDF. The Department of Human Resources (DHR) is the lead agency for the administration of TANF. Through a Memorandum of Understanding (MOU), DHR determines eligibility for child care subsidy services. The MSDE collaborates with DHR, the Governor's Office for Children (GOC), Department of Health and Mental Hygiene (DHMH), Department of Business and Economic Development, (DBED) as well as local governments and resource and referral agencies for the purpose of promoting common policies and practices for all child care related services. This coordination enables the provision of joint training to child care providers that enhances their ability to help young children develop the thinking, language, numeracy, early literacy, social and physical skills necessary for school success.</p>	<p>Coordination of services and training for child care providers, children and families, especially for children with special needs and those identified as low income.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for public health (required)</p> <p>This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health</p>	<p>The Maryland Department of Health and Mental Hygiene (DHMH), and staff from the Division of Early Childhood Development (DECD) serve on the State Interagency Coordinating Council for Infants and Toddlers, the State's Early Childhood Mental Health Steering Committee, Inclusive Child Care Workgroup, and the Healthy Child Care Maryland Workgroup. Representatives from the State's public health agencies and organizations participate in the State's Advisory Council on Early Childhood Education and Care that works to establish and coordinate services across programs for low income families with young children. Some of the services provided include child care, physical and mental health needs, early education, inclusion of children with special needs and other family support needs.</p>	<p>The Lead Agency coordinates with the Maryland Department of Health and Mental Hygiene (DHMH) for the provision of training for child care providers, information on Medication Administration policies and procedures and training outcomes for child care providers with the common goal of ensuring children's health and safety regarding the administration of medicine in child care settings. DHMH provides guidance to the Lead Agency on Asthma Friendly Child Care and other special health issues with the goal of increased inclusion of children with special health needs in child care programs. DHMH and MSDE coordinate to develop consistent health policies and forms for use in child care and school settings.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for employment services / workforce development (required)</p>	<p>The Maryland Department of Business and Economic Development (DBED) is represented on the Office of Child Care (OCC) Advisory Council, as mandated by statute. The Office works in collaboration and coordination with DBED to identify workforce development issues and strategies. Such strategies include job fair opportunities and joint information sharing sessions.</p>	<p>The goal of the Maryland Department of Business and Economic Development is to provide programs that help increase the availability of child care and to promote the state's business and economic development. The Maryland Department of Business and Economic Development provides loan guarantees to child care providers through the Maryland Industrial Development Financing Authority program.</p>

<input checked="" type="checkbox"/> State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies (required)	The Maryland Department of Human Resources (DHR) has the responsibility for administering TANF services. MSDE and DHR have developed a Memorandum of Understanding (MOU) that stipulates that DHR continues to determine eligibility for child care subsidy services.	The goal of the Maryland Department of Human Resources is to ensure that TANF-eligible families have access to child care and they receive services for which they are eligible, enabling parents to work and children to be in settings that prepare them to enter school ready to learn.
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<input type="checkbox"/> Indian Tribes/Tribal Organizations (required) <input checked="" type="checkbox"/> N/A: No such entities exist within the boundaries of the State		
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For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery

<input checked="" type="checkbox"/> State/Territory agency with the Head Start Collaboration grant	The Maryland State Department of Education, Division of Early Childhood Development	Increased participation of Head Start in state policy and program decisions, increased full-day and year-round child care and education services, and improved local partnerships between Head Start, child care, and public schools.
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<input checked="" type="checkbox"/> State/Territory agency responsible for Race to the Top - Early Learning Challenge (RTT-ELC) <input type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC	The Maryland State Department of Education, Division of Early Childhood Development.	
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<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for the Child and Adult Care Food Program (CACFP)</p>	<p>The Maryland State Department of Education, Community Nutrition Programs Branch administers the CACFP. The Office of Child Care collaborates and consults with the Community Nutrition Programs Branch.</p>	<p>Increased number of child care programs participating in the CACFP, improved nutrition practices resulting in more children entering school ready to learn, resource and technical assistance sharing to improve provider knowledge of child nutrition and healthy eating habits.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for programs for children with special needs</p> <p>This may include, but is not limited to:</p> <p>State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs</p>	<p>MSDE's Division of Special Education and Early Intervention and the Division of Early Childhood/Office of Child Care participate in a workgroup focusing on inclusive child care.</p>	<p>The result of coordination is that children with special needs will be included in child care settings and that all services provided through Special Education and Early Intervention will take place in the natural environment and child care providers will be included in training opportunities.</p>
<input checked="" type="checkbox"/>	<p>State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant</p>	<p>A representative of the Department of Health and Mental Hygiene, responsible for implementing the Home Visitation Programs grant, serves on the OCC Advisory Council. MSDE and OCC are collaboration and coordination partners in the Home Visitation grant application process.</p>	<p>The result of coordination is that home visitors will receive information about child care settings, resources available such as Healthy Beginnings early learning guidelines, and that they will provide information to child care providers and parents to address the unique needs of the child, home, family and provider.</p>

<input checked="" type="checkbox"/>	State/Territory agency responsible for child welfare	Through membership on the OCC Advisory Council, by statutory requirement, representatives of the Maryland Department of Human Resources make recommendations to the Office of Child Care on the CCDF Plan.	The goal is that all families receive the services for which they are eligible.
<input checked="" type="checkbox"/>	State/Territory liaison for military child care programs or other military child care representatives	The Office of Child Care has Memoranda of Understanding with offsite child care sites for military families.	The goal is to ensure military families have access to child care and that all councils and agencies coordinate their efforts toward the same outcomes.
<input type="checkbox"/>	Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21		
<input checked="" type="checkbox"/>	Local community organizations (child care resource and referral, Red Cross)	Local Child Care Resource and Referral Agencies and the United Way of Central Maryland are represented on the OCC Advisory Council.	The goal of the resource and referral agencies is to provide information to parents on the child care options available throughout the State, and provide information, training, and technical assistance to child care providers.
<input checked="" type="checkbox"/>	Provider groups, associations or labor organizations	Maryland Association for the Education of Young Children, Maryland State Child Care Association, Maryland State Family Child Care Association, Maryland School Age Child Care Alliance, Maryland Head Start Association, and Service Employees International Union (SEIU)	The goal of the provider associations is to gather information from their membership concerning child care regulations and issues to advise the State, keep their memberships informed of current issues and advocate for quality child care and workforce development.
<input type="checkbox"/>	Parent groups or organizations		
<input checked="" type="checkbox"/>	Other	Representative of Consortium of Early Childhood Faculty in Two and Four-Year Colleges serves on the OCC Advisory Council.	The goal is to provide courses and career preparation programs resulting in an increase in the skills and knowledge base of child care providers and the number who achieve a degree in early childhood/education.

1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan? Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

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Yes. If yes,

a)

Provide the name of the entity responsible for the coordination plan(s):
Maryland State Department of Education, Division of Early Childhood Development,
Collaboration and Program Improvement Branch

b)

Describe the age groups addressed by the plan(s):

[Birth through five years of age.](#)

c)

Indicate whether this entity also operates as the State Advisory Council
(as authorized under the Head Start Act of 2007):

Yes

No

d)

Provide a web address for the plan(s), if available:

http://www.marylandpublicschools.org/MSDE/divisions/child_care/planning

No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs? (658D(b)(1)(D), §98.14(a)(1)) Check which entity(ies), if any, the State/Territory has chosen to designate.

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State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

[Governor's Office for Children, Birth through School-Age. See below.](#)

State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

Maryland State Department of Education is responsible for convening and staffing the State Advisory Council on Early Childhood Education and Care (State Advisory Council). The Council is charged with facilitating a strong and steady improvement in early care and education, and after reviewing Maryland's history of progress, the Council has developed a three year action plan for September 2010-August 2013 identifying three goals. 1. All children birth through age 5 will have access to adequate and equitably funded quality early care and education programs that meet the diverse needs of families. 2. Families of all young children will have access to the resources needed to be their child's first teacher. 3. Children, birth through age five, will have access to adequate and equitable resources that will enable them to arrive at school with healthy minds and bodies. Age groups: birth through school-age.

Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

Maryland State Department of Education and the Governor's Office provide guidance and direction to the local coordination council. Local Coordination Council link <http://goc.maryland.gov/scclcc.html>

Other

Describe

None

1.5.4 Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

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Yes .

If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership:

Johns Hopkins University/Center for Technology in Education (JHU/CTE), in partnership with MSDE, developed and administers the state's QRIS, Maryland EXCELS; JHU/CTE has a similar partnership for young children with special needs, MSDE Accreditation and MSDE's Comprehensive Assessment System.

Maryland Business Roundtable/Ready at Five Partnership promotes early care and education in all settings and disseminates annually, the MMSR Kindergarten Assessment information to child care providers and provides information for parents;

MSDE entered into a partnership with Northrop-Grumman to provide a Science, Technology, Engineering and Mathematics (STEM)-related preschool project in early care programs.

No

1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the Information Memorandum (CCDF-ACF-IM-2011-01) located on the Office of Child Care website at: <http://www.acf.hhs.gov/programs/occ/resource/im-2011-01>

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

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Planning. Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.

Developed. A plan has been developed as of **[insert date]:** [9/1/2007](#) and put into operation as of **[insert date]:** [7/1/2010](#), if available. Provide a web address for this plan, if available: <http://www.projectsecurityblanket.org/>

Other.
Describe:

1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan. Check which elements, if any, the Lead Agency includes in the plan.

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- Planning for continuation of services to CCDF families
- Coordination with other State/Territory agencies and key partners
- Emergency preparedness regulatory requirements for child care providers
- Provision of temporary child care services after a disaster
- Restoring or rebuilding child care facilities and infrastructure after a disaster
- None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

2.1 Administration of the Program

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), §98.11(a))

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

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- Eligibility rules and policies (e.g., income limits) are set by the:
 - State/Territory
 - Local entity.

If checked, identify the type of policies the local entity(ies) can set

- Other.

Describe:

- Sliding fee scale is set by the:
 - State/Territory
 - Local entity.

If checked, identify the type of policies the local entity(ies) can set

Other.

Describe:

Payment rates are set by the:

State/Territory

Local entity.

If checked, identify the type of policies the local entity(ies) can set

Other.

Describe:

2.1.2. How is the CCDF program operated in your State/Territory? In the table below, identify which agency(ies) performs these CCDF services and activities.

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Implementation of CCDF Services/Activities

Agency (Check all that apply)

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

Implementation of CCDF Services/Activities

Who determines eligibility?

Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe:

Agency (Check all that apply)

CCDF Lead Agency

TANF agency

Other State/Territory agency.

Describe:

- Local government agencies such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe:

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

Agency (Check all that apply)

- CCDF Lead Agency
- TANF agency
- Other State/Territory agency.

Describe:

- Local government agencies such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe:

Who issues payments?

Agency (Check all that apply)

- CCDF Lead Agency
- TANF agency
- Other State/Territory agency.

Describe:

- Local government agencies such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe:

[A private contractor processes payments. The State Comptroller issues the payments.](#)

Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc)

[Payments are issued directly to the provider either by check or electronic fund transfer.](#)

Other. List and describe:

2.2. Family Outreach 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)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a)) Check all agencies and strategies that will be used in your State/Territory.

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- CCDF Lead Agency
- TANF offices
- Other government offices
- Child care resource and referral agencies
- Contractors
- Community-based organizations
- Public schools
- Internet

(provide website): http://marylandpublicschools.org/MSDE/divisions/child_care/subsidy/

- Promotional materials
- Community outreach meetings, workshops or other in-person meetings
- Radio and/or television
- Print media
- Other.

Describe:

[Service Employees International Union \(SEIU\)](#)

2.2.2. How can parents apply for CCDF services? Check all application methods that your State/Territory has chosen to implement.

Effective Date: 01-OCT-13

- In person interview or orientation
- By mail
- By Phone/Fax
- Through the Internet

(provide website): <https://www.marylandsail.org/Screening/Default.aspx>

- By Email
- Through a State/Territory Agency
- Through an organization contracted by the State/Territory
- Other.

Describe:

2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices about the quality of care provided by various providers in their communities.

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Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices (658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

Parents applying for CCDF assistance are provided information from the local department of social services' (LDSS) customized information packets.

The LDSS packets explain to parents that they have a choice of formal or informal care. Parents are informed of child care resources through the LDSS, MSDE offices and the MSDE hotline. Maryland Family Network, under a contract with the Lead Agency, provides information to parents on choosing child care.

http://www.mdchildcare.org/mdcfc/for_parents/parents.html is a free service to families seeking child care provided by Maryland Family Network through a contract with the Lead Agency. The state's licensing compliance website www.checkccmd.org provides information on the compliance history and quality level of regulated providers statewide and is made available to all families and the public. The parent may take the voucher(s) to the provider(s) of his/her choice. Providers are required to inform parents about resources available on choosing quality child care at the time of admission.

TANF applicants and CCS customers may receive one month of job search activity.

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

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For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

Maryland EXCELS, the state's revised Tiered Quality Rating and Improvement System, recognizes child care facilities that exceed the minimum requirements of licensing and registration. Five progressive check levels define a pathway to excellence and create a core framework that encompasses quality initiatives in Accreditation, Credentialing, Professional Development, Developmentally Appropriate

Learning and Practice and Administrative Practices. Maryland EXCELS, through its online system, mobile app and print materials, offers information to families on choosing high quality child care and articulates to the public the level of quality in early and school-age care and education programs as well as the benefits to the community.

Maryland EXCELS provides bonuses to participating programs and providers and a Child Care Subsidy differential based upon the age of the child being served and quality level attained. Both program bonuses for attainment of higher check levels and tiered reimbursement/subsidy differential payments increase with each quality level attained, to promote upward movement through the levels. Quality Assurance Specialists have been hired to recruit and support high quality programs throughout the state, especially those in areas of high need and in rural, suburban, urban, and low-income communities.

Quality Assurance Specialists are located in regional licensing offices throughout the state and provide outreach, technical assistance and support to programs in their local communities. Programs participating in Maryland EXCELS are assigned a Program Coordinator when they register through the online system. Program Coordinators maintain contact with programs and providers, verify documents uploaded into the system and assist with identifying items needed to move to the next quality level.
<http://www.marylandexcels.org/>

The State's Maryland Child Care Credentialing program is a professional development framework that includes incentives for additional training, professional experience and activities. The State administers the Tiered Reimbursement program that recognizes child care facilities that exceed the minimum requirements of licensing and registration. There are four levels of tiered reimbursement, each one recognizing a child care facility's participation in program accreditation, provider credentialing, enhanced learning environment, parent involvement, and program evaluation. Facilities participating at Level Two or higher receive a certificate of achievement and a paid differential based on Child Care Subsidy vouchers. Although participation in the tiered reimbursement program is voluntary, there are regulatory requirements that apply to program participation. These requirements are found at COMAR 13A.14.09.09.

MSDE is in planning to implement an electronic Time and Attendance System (TAS) for child care reimbursements. The TAS will streamline attendance reporting process for child care providers. The TAS will also give child care providers access to information on child authorizations, allow for weekly reimbursement and internet access to administrative reports.

MSDE offers funding to programs receiving subsidy and/or in Title 1 school districts to purchase approved instructional materials, equipment, and supplies to improve the quality of care. These initiatives are to encourage higher quality provider participation in the Subsidy Program.

Maryland provides state accreditation to licensed child care centers at no cost. The MSDE accreditation program is a process by which early care and education programs can significantly improve the quality of the services they provide. In this process, a program voluntarily pursues self-study, program improvement, and external program review to achieve and publicly confirm that it meets state quality standards. MSDE approved validators are available at no charge to provide technical assistance and direct support services to the child care center so they can improve the quality of their services to meet State program standards.

The Child Care Quality Incentive Grant Program offers competitive grants to family child care and child care center programs to improve the quality of care provided to children birth to four years for the purchase of approved supplies, materials and equipment with an emphasis on educational curricula. To be eligible, a family child care home must serve children who receive child care subsidies. Child care centers must either be located in Title One school areas or at least 25% of the children enrolled must receive child care subsidies

2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program? Check the strategies that will be implemented by your State/Territory.

Effective Date: 01-OCT-13

Provide access to program office/workers such as by:

- Providing extended office hours
- Accepting applications at multiple office locations
- Providing a toll-free number for clients
- Email/online communication
- Other.

Describe:

Using a simplified eligibility determination process such as:

- Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
- Developing a single application for multiple programs
- Developing web-based and/or phone-based application procedures
- Coordinating eligibility policies across programs.

List the program names:

- Streamlining verification procedures, such as linking to other program data systems
- Providing information multi-lingually
- Including temporary periods of unemployment in eligibility criteria for new applicants (job search, seasonal unemployment).

Length of time: [30 days](#)

(Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).

Other.

Describe:

[Using verification's submitted for other programs such as Food Stamps or TANF to determine eligibility.](#)

Other.

Describe:

None

2.2.6. Describe the Lead Agencies policies to promote continuity of care for children and stability for families. Check the strategies, if any, that your State/Territory has chosen to implement.

Effective Date: 01-OCT-13

Provide CCDF assistance during periods of job search.

Length of time: [30 days](#)

Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)

Synchronize review date across programs

List programs:

Longer eligibility re-determination periods (e.g., 1 year).

Describe:

[Twelve month re-determination periods offered to customers in stable work activities\(a customer who has remained at the same activity for one or more redetermination cycles\) or SSI recipients.](#)

Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs.

Describe:

[Allow families receiving child care services who become over-scale for the program or lose their employment to continue their child\(ren\) in Head Start or Early Head Start until the end of the year.](#)

Extend periods of eligibility for school-age children under age 13 to cover the school year.

Describe:

Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment

Individualized case management to help families find and keep stable child care

arrangements.

Describe:

Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year

Other.

Describe:

None

2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency? Check the strategies, if any, that your State/Territory has chosen to implement.

Effective Date: 01-OCT-13

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

Outreach Worker

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 languages offered :

Spanish.

2.2.8. How will the Lead Agency overcome language barriers with providers? Check the strategies, if any, that your State/Territory has chosen to implement.

Effective Date: 01-OCT-13

- 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.

None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered:

Spanish.

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Effective Date: 01-OCT-13

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as **Attachment 2.2.9** or provide a web address, if available:

http://www.marylandpublicschools.org/MSDE/divisions/child_care/subsidy/forms.htm

The Lead Agency requires documentation of:	Describe how the Lead Agency documents and verifies applicant information:
<input checked="" type="checkbox"/> Applicant identity	<p>Maryland implemented a requirement to verify identity effective April 12, 2012. Child Care Subsidy is now verifying identity for parents and children at initial application or for current customers at their next redetermination of eligibility. Proof of identity includes, but is not limited to, a valid unexpired United States passport, a birth certificate, a valid driver's license or a photo identification card. This definition is being expanded to include acceptable documentation used by any of the Family Investment programs.</p>

Household composition

Maryland does not verify documentation for household composition. Any of the following who reside in the household shall be considered part of the family unit: applicant/customer, spouse of the customer, other parent of child needing child care, customer's children under age 18, children for whom the customer has physical custody, customer's children between ages 18 and 22 who are full-time students and considered dependents for tax purposes, parents of a minor parent, siblings of minor parent under age 18 or between 18 and 22 who are full-time students and considered dependents for tax purposes, adult in the household who has physical custody of minor parent or child, spouse of adult who has physical custody of minor parent or child, children of adult who has physical custody of minor parent or child, and step-parent.

Applicant's relationship to the child

Maryland does not currently verify documentation for applicant's relationship to the child except for the relationship of in loco parentis described below.

Family means the family unit consisting of one or more adults and children related by: blood, marriage, adoption or legal guardianship and residing in the same household.

Family means the family unit consisting of adults with physical custody of a child related or unrelated and residing in the same household. If unrelated adults with children in common reside together, they are considered one family unit, whether either has other children residing in the household. Family does not include unrelated adults with no children in common who reside together or related adults, other than spouses, who live together. Each is considered a separate family when determining who is in the family unit and whose income is counted. If the relationship is in loco parentis, the guardian must produce verification of the child lawfully being in their custody.

Maryland plans to implement a regulation change to require submission of birth certificates or other proof of relationship

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

Maryland does not currently request verification of the child's age, but will incorporate the change into the upcoming regulation change. Birth certificates will be requested for any child(ren) on the application needing CCS.

Identity is currently verified for each member of the household. Applicants may submit birth certificates or other federal acceptable form of identification.

Citizenship is verified for children through either a birth certificate, green card, or the Systematic Alien Verification for Entitlements (SAVE) system.

Many verifications can be obtained through other systems. A list is also available on the MSDE and DHR websites for those applicants submitting online or downloading the application. If they are not received, missing verifications are requested in a pending letter and can be submitted within 10 days.

Form 896

<http://marylandpublicschools.org/NR/rdonlyres/B0050A99-6B3C-4396-A996-CC9405971A42/17106/1215ALL3Jun08.pdf>

An applicant who has the care of a child eligible for child support services shall pursue the establishment and enforcement of support obligations on behalf of the child as required by the local CCS case manager. If the applicant is pursuing or receiving regular child support payments for the child, the applicant shall furnish documentation verifying this action to the local CCS case manager at the time of application for child care services.

Work, Job Training or Educational Program

Work, job training or educational program means a pursuit in which an applicant or customer is participating that is approved by the local department for a TCA family, or by an individual who is: enrolled in public school, enrolled in training, participating in a work experience activity, participating in a job search activity, working, participating in a work activity or participating in a community service activity. Proof of enrollment - Verification of training or school attendance with days and hours of activity.

Income

Except when TCA is received only for a child, the income requirement is met by a family that has applied for, or receives, TCA or has an annual gross income not exceeding the maximum income for family size according to the Federal guidelines or is an individual who is a recipient of SSI.
Verification of wages - most recent 4 weeks of paystubs or a letter from the employer stating work schedule and gross salary.

<input checked="" type="checkbox"/> Other. Describe:	This requires proof of address in the form of an apartment or house lease, electric, gas, water or telephone bill.
Maryland does not currently request verification of the child's age, but will incorporate the change into the upcoming regulation change. Birth certificates will be requested for any child(ren) on the application needing CCS.	
Identity is currently verified for each member of the household. Applicants may submit birth certificates or other federal acceptable form of identification.	
Citizenship is verified for children through either a birth certificate, green card, or the Systematic Alien Verification for Entitlements (SAVE) system.	
Many verifications can be obtained through other systems. A list is also available on the MSDE and DHR websites for those applicants submitting online or downloading the application. If they are not received, missing verifications are requested in a pending letter and can be submitted within 10 days.	

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

Effective Date: 01-OCT-13

Time limit for making eligibility determinations.

Describe length of time The process begins when a signed application is received. If all requested documentation is received by the 25th day after submission of the signed application, a determination is made within 30 days. If requested documentation is received between the 25th and 30th days, a decision is made by the 35th day.

Track and monitor the eligibility determination process

Other.
Describe

None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1 through 2.2.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

Effective Date: 01-OCT-13

Yes.

If yes, describe:

No.

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

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. 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.

Effective Date: 01-OCT-13

a) Identify the TANF agency that established these criteria or definitions:

State/Territory TANF Agency [Maryland Department of Human Resources](#)

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

- "appropriate child care": [Child care that meets the parents needs in terms of hours and location, meets the child's needs in terms of health and safety, and is geared toward the healthy development of the child.](#)
- "reasonable distance": [Based on available transportation, a parent would be expected to travel to the child care provider, no more than one hour each way.](#)
- "unsuitability of informal child care": [Informal care that does not meet the standards as established by state law and Code of Maryland Regulations governing the CCS program.](#)
- "affordable child care arrangements": [Those arrangements for which the parent fee charged by the provider is less than or equal to the assigned copayment for a non-TANF family of the same size and income level who receives a subsidy.](#)

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:

The Maryland Department of Human Resources (DHR), Family Investment Division, tells the customer during the face-to-face interview what the participation and requirements are and the penalties for not participating. If the customer fails to cooperate, they receive a conciliation letter for the non-compliance. The customer then has 30 days to correct the non-compliance. If the customer has not complied by the 20th day of the 30 day conciliation period, the 10 day adverse action letter is sent. The case will be closed if the non-compliance is not corrected. DHR notifies the CCS case manager if child care is affected by the non-compliance.

2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

2.3.1. How does the Lead Agency define the following eligibility terms?

Effective Date: 01-OCT-13

residing with -

A child must reside with the parent, legal guardian, or person in loco parentis and intend to remain in Maryland during the time period of requested services.

in loco parentis -

A person who is at least eighteen years old, who is not a child, parent or legal guardian, with whom the child resides and who has assumed control of the child.

2.3.2. Eligibility Criteria Based Upon Age

Effective Date: 01-OCT-13

a) The Lead Agency serves children from six weeks to thirteen years (may not equal or exceed age 13).

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), §98.20(a)(1)(ii))

Yes, and the upper age is up to age 19 (may not equal or exceed age 19).

Provide the Lead Agency definition of *physical or mental incapacity* -

A child who has been diagnosed as being physically or mentally incapable of self-care appropriate to the age of the child, as verified by the State, based on a determination by a physician, a licensed or certified psychologist, or a licensed social worker.

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), §98.20(a)(1)(ii))

Yes, and the upper age is [up to age nineteen](#) (may not equal or exceed age 19).

No.

2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

Effective Date: 01-OCT-13

a) How does the Lead Agency define "working" for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

Reminder - Lead Agencies have the flexibility to include any work-related activities in its definition of working, including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))
working-

[Working means employment in a public or private work setting, as well as up to 30 days of job search for applicants and customers. There is currently no requirement for a minimum number of hours.](#)

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

Yes.

If yes, how does the Lead Agency define "attending job training or educational program" for the purposes of eligibility? Provide a narrative description below.

Reminder - Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

attending job training or educational program -

[Training means any type of instructional program, except for post-college graduate programs, that is approved by the local department of social services. Training includes undergraduate college, vocational programs, publicly funded training programs, or volunteer activities designed to lead to employment of the participant.](#)

No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

Effective Date: 01-OCT-13

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

Yes.

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

Reminder - Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and other vulnerable populations in the definition of protective services.

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 this definition.

protective services

No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

Yes.

No.

2.3.5. Income Eligibility Criteria

Effective Date: 01-OCT-13

a) How does the Lead Agency define "income" for the purposes of eligibility? Provide the Lead Agency's definition of "income" for purposes of eligibility determination.
(§§98.16(g)(5), 98.20(b))

income -

Income is defined as family income that does not exceed 50% of the 2001 FFY Maryland State Median Income for the applicant's family size.

Monthly gross income includes:

- Wages, salary, and net income from self-employment;
- Commissions, tips, and bonuses;
- Dividends and interest;
- Social Security benefits, including disability and survivors benefits;
- Pensions and annuities;
- Estate income;
- Unemployment and Workers' Compensation; and
- Alimony and child support.

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

- Adoption subsidies
- Foster care payments
- Alimony received or paid
- Child support received
- Child support paid
- Federal nutrition programs
- Federal tax credits
- State/Territory tax credits
- Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
- Medical expenses or health insurance related expenses
- Military housing or other allotment/bonuses
- Scholarships, education loans, grants, income from work study
- Social Security Income
- Supplemental Security Income (SSI)
- Veteran's benefits
- Unemployment Insurance
- Temporary Assistance for Needy Families (TANF)
- Worker Compensation
- Other types of income not listed above:

None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

- Children under age 18
- Children age 18 and over - still attending school
- Teen parents
- Unrelated members of household
- All members of household except for parents/legal guardians
- Other.

Describe:

The earned income of children under the age of 18 is excluded, if they are attending school.

None

d) 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 SMI.

Reminder - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). FY 2013 poverty guidelines are available at <http://aspe.hhs.gov/poverty/13poverty.shtml>.

Family Size	(a) 100% of State Median Income (SMI)(\$/month)	(b) 85% of State Median Income (SMI)(\$/month) [Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1	3,094	2,630	1,547	50
2	4,046	3,439	2,023	50
3	4,998	4,248	2,499	50
4	5,950	5,058	2,975	50
5	6,902	5,867	3,451	50

e) Will the Lead Agency have "tiered eligibility" (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

Yes.

If yes, provide the requested information from the table in 2.3.5d and **describe below**:

Note: This information can be included in the table below.

No.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month)[Multiply (a) by 0.85]	IF APPLICABLE Income Level if lower than 85% SMI	
			(c) \$/month	(d) % of SMI[Divide (c) by (a), multiply by 100]
1				
2				
3				
4				
5				

f) SMI Year 2001 and SMI Source http://www.workworld.org/wwwwebhelp/state_median_income.htm#State_Median_Income_2001-1998

g) These eligibility limits in column (c) became or will become effective on:
January 1, 2002

2.3.6. Eligibility Re-determination

Effective Date: 01-OCT-13

Does the State/Territory follow OCC's 12 month re-determination recommendation? (See Program Instruction on Continuity of Care

<http://www.acf.hhs.gov/programs/occ/resource/im2011-06>

Yes

No. If no, what is the re-determination period in place for most families?

6 months

24 months

Other.

Describe: [A maximum of 12 months is available. The customers circumstances may warrant a shorter period based on the duration of the activity.](#)

Length of eligibility varies by county or other jurisdiction.

Describe:

b) Does the Lead Agency coordinate or align re-determination periods with other programs?

Yes. If yes, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

Head Start and/or Early Head Start Programs.

Re-determination period: [Re-determination period is within 10 days of the completion of the Head Start Program year if the child is receiving Child Care Subsidy.](#)

Pre-kindergarten programs.

Re-determination period:

TANF.

Re-determination period:

SNAP.

Re-determination period:

Medicaid.

Re-determination period:

SCHIP.

SCHIP.

Re-determination period:

Other.

Describe:

No.

c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.

[A family's eligibility will be reviewed prior to redetermination if there is an interim change that generates significant changes in the family's situation.](#)

d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination

Findings from an interim change could reduce, suspend or close the child care subsidy case.

e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>).

The family will be allowed to submit documentation or request an appeal for consideration of their case. They can request to continue the subsidy during the appeals process with the understanding that if they lose the subsidy has to be repaid.

f) Does the Lead Agency use a simplified process at re-determination?

Yes.

If yes, describe:

No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select **ONE** of these options.

Effective Date: 01-OCT-13

Lead Agency currently does not have a waiting list and:

All eligible families *who apply* will be served under State/Territory eligibility rules

Not all eligible families *who apply* will be served under State/Territory eligibility rules

Lead Agency has an active waiting list for:

Any eligible family who applies when they cannot be served at the time of application

Only certain eligible families.

Describe those families:

Families at the highest income levels – I and J.

Waiting lists are a county/local decision.

Describe:

Other.

Describe:

The waiting list is currently open to families on specific levels. On November 19, 2012, the waiting list opened for levels A – C. Levels D – H were opened on March 11, 2013. Only two levels remain frozen, I – J.

2.3.8. Appeal Process for Eligibility Determinations

Effective Date: 01-OCT-13

Describe the process for families to appeal eligibility determinations:

An applicant or recipient may request a hearing if the local department denies, suspends, reduces or terminates assistance; fails to act with reasonable promptness on an application for, or a request for, adjustment of assistance, or imposes sanctions on a recipient or recovers an overpayment in assistance.

The local department shall send a written notice of any adverse action. The applicant or recipient may request an appeal within 90 calendar days of the local department's action. An appeal request is made in writing by the customer. The filing date of the appeal request is the date the local department received it. The request is immediately forwarded to the designated hearing coordinator. The local department shall assist the appellant in completing an appropriate appeal request form to ensure that it contains all the information required to process the request and, if necessary, shall provide an interpreter.

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require 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 (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1. Will the attached sliding fee scale be used in all parts of the State/Territory?

Yes.

Effective Date: [January 1, 2002](#)

No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B)) Check only one option..

State Median Income,

Year:

Federal Poverty Level,

Year: [2001](#)

Income source and year varies by geographic region.

Describe income source and year:

Other.

Describe income source and year:

2.4.3. 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. (§98.42(b))

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

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

No additional percentage applied charged after certain number of children

Fee per family

Contribution schedule varies by geographic area.

Describe:

The family size and gross income is compared to the sliding fee scale to determine at which subsidy level the family is eligible. The subsidy level is then compared to the co-payment chart to determine the family's contribution. Subsidy levels and co-payments vary by jurisdiction based on the cost of living in that area. The co-payment is collected by the child care provider on a regular schedule determined by the child care provider. If the local department is notified that the co-payment is not being paid, then the case is closed.

Other.

Describe:

If the Lead Agency checked more than one of the options above, describe:

The family size and gross income is compared to the sliding fee scale to determine at which subsidy level the family is eligible. The subsidy level is then compared to the co-payment chart to determine the family's contribution. Subsidy levels and co-payments vary by jurisdiction based on the cost of living in that area. The co-payment is collected by the child care provider on a regular schedule determined by the child care provider. If the local department is notified that the co-payment is not being paid, then the case is closed.

2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

Effective Date: 01-OCT-13

Yes,

and describe those additional factors:

The family's contribution for the youngest child in care is based on family size and income. Any additional co-payments for the second and third child are based on a reduced percentage of the cost of care. The fourth child and any subsequent children in a family are not assigned a co-payment. Co-payments range from 5% to 50% of the cost of care for the first child in care and 3% to 40% for the second and third children.

No.

2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)). Select **ONE** of these options.

Reminder - Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of "protective services" (as defined in 2.3.4.a).

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ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.

NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee.

The poverty level used by the Lead Agency for a family of 3 is:

SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.

The Lead Agency waives the fee for the following families:

[Fees are waived for TCA and SSI customers.](#)

2.5. Prioritizing Services for Eligible 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. 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), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44) Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

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How will the Lead Agency prioritize CCDF services for:	Eligibility Priority (Check only one)	Is there a time limit on the eligibility priority or guarantee?	Other Priority Rules
<p>Children with special needs</p> <p>Provide the Lead Agency definition of Children with Special Needs:</p> <p>A person up to the age of 19 who has been diagnosed as being physically or mentally incapable of self-care appropriate to the age of the child, as verified by the State, based on a determination by a physician, a licensed or certified psychologist, or a licensed social worker. This definition applies for the purposes of payment and for the purposes of prioritizing services.</p>	<p><input checked="" type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input type="checkbox"/> Other.</p> <p>Describe:</p>	<p><input type="checkbox"/> Yes.</p> <p>The time limit is:</p> <input type="text"/> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds.</p> <p>Describe:</p> <input type="text"/> <p><input checked="" type="checkbox"/> Higher rates for providers caring for children with special needs requiring additional care</p> <p><input type="checkbox"/> Prioritizes quality funds for providers serving these children</p> <p><input type="checkbox"/> Other.</p> <p>Describe:</p> <input type="text"/>
<p>Children in families with very low incomes</p> <p>Provide the Lead Agency definition of Children in Families with Very Low Incomes:</p> <p>A family that has an income that is less than or equal to 50% of SMI (FFY2001, SFY2002) for their family size.</p>	<p><input type="checkbox"/> Priority over other CCDF-eligible families</p> <p><input type="checkbox"/> Same priority as other CCDF-eligible families</p> <p><input type="checkbox"/> Guaranteed subsidy eligibility</p> <p><input checked="" type="checkbox"/> Other.</p> <p>Describe:</p> <p>Maryland's priorities for serving Subsidy children are families with documented special needs, receiving SSI, receiving TANF, transitioning off TANF and with low-incomes. This priority is applied whether or not a waiting list is in effect.</p>	<p><input type="checkbox"/> Yes.</p> <p>The time limit is:</p> <input type="text"/> <p><input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Different eligibility thresholds.</p> <p>Describe:</p> <input type="text"/> <p><input checked="" type="checkbox"/> Waiving co-payments for families with incomes at or below the Federal Poverty Level</p> <p><input type="checkbox"/> Other.</p> <p>Describe:</p> <input type="text"/>

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of 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? (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4)) **Reminder** - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance 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.

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- Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
 - Waive fees (co-payments) for some or all TANF families who are below poverty level
 - Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
 - Other.
- Describe:

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) **Reminder** - Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

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Term(s) - Definition(s)

Describe:

Priority Families - Maryland's priorities for serving Subsidy children are families: with documented special needs, receiving SSI, receiving TANF, transitioning off TANF and with low-incomes. This priority order is applied whether or not a waiting list is in effect.

2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives 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), §98.15(a))

2.6.1. Child Care Certificates

Effective Date: 01-OCT-13

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

- Before parent has selected a provider
- After parent has selected a provider
- Other.

Describe:

In Maryland, the certificate is called a child care voucher. The voucher is generated by an automated system and completed for each child in care. Eligible parents then receive vouchers.

Parents may request an application for a voucher from the local department of social services in their area. They must complete and return it along with required documentation to determine eligibility. Since a face-to-face interview is not required, the completed application and necessary verifications can be dropped off or mailed.

Two types of vouchers are produced. The first is for regulated (licensed child care) programs and the second is for unregulated care (informal child care).

Vouchers are issued on the basis of family eligibility for the child care subsidy program. A separate voucher is issued for each child in need of care and may be used to obtain services from any regulated child care provider or legally operating informal provider.

Case managers who determine eligibility discuss child care options with parents and can make referrals to child care resource and referral agencies if parents need assistance with locating a provider.

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

- Certificate form provides information about choice of providers
- Certificate is not linked to a specific provider so parents can choose provider of choice
- Consumer education materials (flyers, forms, brochures)
- Referral to child care resource and referral agencies
- Verbal communication at the time of application
- Public Services Announcement
- Agency

Website: www.marylandpublicschools.org

- Community outreach meetings, workshops, other in person activities

Multiple points of communication throughout the eligibility and renew process

Other.

Describe:

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

Authorized provider(s)

Authorized payment rate(s)

Authorized hours

Co-payment amount

Authorization period

Other.

Describe:

The family information, including names, address, date of birth for child(ren), days and hours of care that are authorized for payment, and the assigned parental co-payment.

d) What is the estimated proportion of services that will be available for child care services through certificates?

100%

2.6.2. Child Care Services Available through Grants or Contracts

Effective Date: 01-OCT-13

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), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **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 process for accessing grants or contracts, and the range of providers that will be available through grants or contracts:

No. If no, skip to 2.6.3

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

- Increase the supply of specific types of care
- Programs to serve children with special needs
- Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
- Programs to serve infant/toddler
- School-age programs
- Center-based providers
- Family child care providers
- Group-home providers
- Programs that serve specific geographic areas
- Urban
- Rural
- Other.

Describe:

- Support programs in providing higher quality services
- Support programs in providing comprehensive services
- Serve underserved families.

Specify:

- Other.

Describe:

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

- Yes.
- No,

and **identify** the localities (political subdivisions) and services that are not offered:

d) How are payment rates for child care services provided through grants/contracts determined?

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts?

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31)) Check the strategies that will be implemented by your State/Territory.

Effective Date: 01-OCT-13

- Signed declaration
- Parent Application
- Parent Orientation
- Provider Agreement
- Provider Orientation
- Other.

Describe:

State child care licensing regulations require that each family child care home and child care center permit the parent of a child in care to have access, without prior notice, to the child at any time during the program's operating hours and to freely observe all areas of the facility that are used for child care.

As a condition of receiving payment from the child care subsidy program, a legally operating informal provider agrees to allow the same access to the child in care and to the facility as required of regulated programs. Information about the right of access is explained in the Informal Provider Health and Safety packet given to all parents and providers who choose to use informal care. Parents and providers must sign and return a signature page indicating they have read and understand the information.

For licensed child care providers, licensing regulations require the provider to post and have available to parents, a pamphlet entitled "A Parent's Guide to Regulated Child Care" that contains information on rights and responsibilities of parents, including the right to visit the facility without prior notification at any time their child is there.

2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv)) Will the Lead Agency limit the use of in-home care in any way?

- No
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care?
Check all limits the Lead Agency will establish.
- Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
- Restricted based on provider meeting a minimum age requirement
- Restricted based on hours of care (certain number of hours, non-traditional work hours)
- Restricted to care by relatives
- Restricted to care for children with special needs or medical condition
- Restricted to in-home providers that meet some basic health and safety requirements
- Other.
- Describe:

Restricted to care by relatives or care provided in the child's own home. Unless permission is given by the local director for more than six children, local departments may approve payment for informal child care when the total number of children in the provider's care is six or less. This includes not more than two children younger than 24 months old; and counting the provider's own children younger than 6 years old among the six children.

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

Effective Date: 01-OCT-13

Since November 2002, the agency has maintained a secure Internet-based provider complaint reporting and tracking system that is utilized by regional licensing office staff to conduct all complaint intakes and record all complaint investigation outcomes. This computerized system is specifically designed to track the progress of each complaint investigation through to its conclusion and to report statistical complaint data for analysis and evaluation.

Each complaint, whether a parental complaint or anonymous complaint received by the Office of Child Care, is logged into the child care facility's permanent file. All documentation pertaining to the subsequent investigation and disposition of the complaint is also placed in the facility's file. At the conclusion of each investigation, the investigation findings are summarized on a record of complaint form and the complaint is categorized as confirmed (substantiated), ruled out, or uncertain. Any and all complaints, both written and oral, that relate to a potential violation of a regulation or unregistered/unlicensed care are investigated.

Information about substantiated complaints is readily available upon request by any member of the public. The extent and method of public access to records of substantiated complaints involving child care facilities are specified under Maryland's child care center and family child care home regulations. Complaints are investigated by the Office of Child Care's Regional Licensing Offices. Complaints are made to the Regional Licensing Office for the jurisdiction in which the provider resides. Contacts for the

thirteen Regional Offices are as follows:

Region 1 – Anne Arundel County - 410-514-7850

Region 2 - Baltimore City - 410-554-8300

Region 3 – Baltimore County - 410-583-6200

Region 4 – Prince George’s County - 301-333-6940

Region 5 – Montgomery County - 240-314-1401

Region 6 – Howard County - 410-750-8770 and Carroll County 410-549-6489

Region 7 – Western MD (Allegany, Garrett, Washington Co.) - 301-791-4584 and
Frederick County - 301-696-9766

Region 8 – Upper Shore (Caroline, Dorchester, Kent, Talbot, and Queen Anne’s Co.) - 410-819-5801

Region 9 – Lower Shore (Somerset, Wicomico, and Worcester Co.) - 410-713-3430

Region 10 – Southern Tri-County (Calvert, Charles, and St. Mary’s Co.) - 301-475-3770

Region 11 – North Central (Cecil/Harford Co.) - 410-569-8065

Every complaint of unlicensed (illegal) child care, regardless of the source of the complaint or method received, is investigated by regional licensing office staff according to a written protocol.

2.7. Payment Rates for Child Care Services

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish adequate payment rates for child care services that ensure eligible children equal access to comparable care.

2.7.1. Attach a copy of your payment rates as Attachment 2.7.1. Will the attached payment rates be used in all parts of the State/Territory?

Effective Date: 01-OCT-13

Yes. Effective Date: [January 4, 2010](#)

No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b, etc.** , etc.

2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

Effective Date: 01-OCT-13

Policy on length of time for making payments.

Describe length of time: [Child care provider must submit the invoice for payment within 60 days of the last day of service. Payments must be processed within 3 days of receiving the submitted invoice.](#)

Track and monitor the payment process

Other.

Describe:

None

2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2009). The MRS must be completed prior to the submission of the CCDF Plan (see Program Instruction CCDF-ACF-PI-2009-02 <http://www.acf.hhs.gov/programs/occ/resource/pi-2009-02> for more information on the MRS deadline).

Effective Date: 01-OCT-13

a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): [01/2013](#)

b) Provide a **summary of the results** of the survey.

The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

Maryland Family Network (MFN) collects and maintains information on all licensed and regulated child care facilities in Maryland. MFN provides rate information that was collected within the past 24 month period. Because MSDE attempts to collect this information from the entire population of regulated providers, there is no sample population or sample selection per se. The information is based on responses from the entire population of providers.

Rate information is entered into the provider database primarily through an annual questionnaire. Providers also may update rate information on the MFN website or over the phone with MFN - LOCATE Child Care staff.

Each year, every regulated provider is asked to update their information via a questionnaire. Follow up phone calls are made to gain information from providers who have not returned the questionnaire and for clarification when needed. Information is also updated by counselors when making referrals and by providers either on-line or via phone calls to MFN's provider support line. Updating rate information is an ongoing, continuous process. The goal is accurate, reasonably current, rate information on the whole population of providers.

The market rate data is prepared as follows:

- Fee information for the requested age groups, types of care, and regions is extracted from the database of licensed providers.
- MFN maintains fees based on age in years. If the requested age grouping is multi-year (e.g. "infant", comprising 0-11 months and 12-24 months) then fees are processed as follows: fees for each year are summed, then divided by the number of non-zero values, for example, if a provider reports fees of 125 dollars for 0-11 months and 100 dollars for 12-24 months, then the averaged fee for 0-24 months for that provider would be 112.5 (125+100 = 225, divided by 2 fees equals 112.5)
- The non-zero fees for each category are rank ordered in a spread sheet. The appropriate counts and percentiles are calculated (using Excel functions) and the entire sheet is sent to MSDE for analysis and

reporting.

Response Rate

Rate Region	2-4	5+	Infant
U	23.4%	25%	10.4%
V	21%	20%	16.2%
W	25.3%	25.1%	13.6%
X	18.2%	17.1%	10.4%
Y	23.2%	23.5%	11.8%
Z	24.2%	25.8%	13.6%
B	22.3%	22%	14.1%

Findings on the 2013 market rate data

Towson University's Regional Economic Studies Institute (RESI) analyzed the market rate data for 2013 and found that current Child Care Subsidy rates represent the 10th percentile of the 2013 market rates. (This overall figure was derived by weighting the percentiles of the various geographic, care type and rate type groupings by their May 2012 subsidy enrollments, so it accurately represents how the percentiles are experienced by the current subsidy population.)

Further disaggregating the rate percentiles by rate region shows the following:

Region	Infant		Regular	
	Family	Center	Family	Center
U	11th	15th	10th	14th
V	9th	11th	12th	2nd
W	13th	9th	9th	8th
X	10th	9th	10th	3rd
Y	11th	14th	11th	5th
Z	15th	11th	17th	9th
B	23rd	9th	25th	8th

2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

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2.7.4a - Highest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	\$1,515.50	\$1,105.00	9th
Full-Time Licensed Center Preschool (59 months)	\$1,168.96	\$705.79	3rd

Full-Time Licensed Center School-Age (84 months)	\$1,168.96	\$705.79	3rd
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2.7.4b - Lowest Rate Area (Centers)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed Center Infants (11 months)	\$844.35	\$476.67	11th
Full-Time Licensed Center Preschool (59 months)	\$544.57	\$371.16	9th
Full-Time Licensed Center School-Age (84 months)	\$544.57	\$371.16	9th

2.7.4c - Highest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	\$1,082.50	\$780.00	11th
Full-Time Licensed FCC Preschool (59 months)	\$923.20	\$623.27	10th
Full-Time Licensed FCC School-Age (84 months)	\$923.20	\$623.27	10th

2.7.4d - Lowest Rate Area (FCC)	(a) Monthly Payment Rate at the 75th percentile from the most recent MRS	(b) Monthly Maximum Payment Rate Ceiling	(c) Percentile if lower than 75th percentile of most recent survey
Full-Time Licensed FCC Infants (11 months)	\$541.25	\$411.67	15th
Full-Time Licensed FCC Preschool (59 months)	\$454.77	\$351.35	12th
Full-Time Licensed FCC School-Age (84 months)	\$454.77	\$351.35	12th

2.7.5. How are payment rate ceilings for license-exempt providers set?

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a) Describe how license-exempt center payment rates are set:

N/A

b) Describe how license-exempt family child care home payment rates are set:

N/A

c) Describe how license-exempt group family child care home payment rates are set:

N/A

d) Describe how in-home care payment rates are set:

Approximately 50% of the amount paid to family child care home providers is paid to in-home care providers.

2.7.6. Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies? Check which types of tiered reimbursement, 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 and amount and also indicate if the rates were set based on the MRS or another process.

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Differential rate for nontraditional hours.

Describe:

The local department shall approve additional costs that exceed the payment rates in §§B-D of Regulation 13A.14.06.09 when child care is provided during non-traditional hours.

Differential rate for children with special needs as defined by the State/Territory.

Describe:

For a child with a disability\special needs the payment rates of Regulation 13A.14.06.09 apply except if the service provider offers documentation to the local department of social services that the cost for caring for the child exceeds the reasonable accommodation definition. In which case, the local department shall approve the additional cost, not to exceed the annual allocated amount up to 15%

above the rates set out in §§C and D of the regulation; or if the requested amount exceeds 15%, the local department shall submit a recommendation to the central Child Care Subsidy Branch for approval of a higher payment not to exceed the annual allocated amount.

Differential rate for infants and toddlers.

Describe:

Differential rate for school-age programs.

Describe:

Differential rate for higher quality as defined by the State/Territory.

Describe:

Other differential rate.

Describe:

None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see Information Memorandum on Continuity of Care for examples <http://www.acf.hhs.gov/programs/occ/resource/im2011-06>), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency...

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Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

Pays for provider fees (e.g., registration, meals, supplies).

Describe:

Policies vary across region, counties and or geographic areas.

Describe:

Other.

Describe:

2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

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a) Number of absent days allowed. Describe

Family child care and center child care providers are paid for the time a child is absent up to 60 calendar days per year, except that in the case of illness or injury of the child documented by a health practitioner, the contractor may authorize additional absences.

b) Paying based on enrollment. Describe

N/A

c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe

N/A

d) Using electronic tools(automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe

The provider must submit an invoice for reimbursement by fax, email or mail within 60 days of the end date of the last service period. Providers may elect to receive an electronic direct deposit payment.

2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

Effective Date: 01-OCT-13

a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1)):

Jurisdictions are grouped together into seven regions based on similarity of child care market rates and other economic indicators. Rates are established within the seven regions for family child care and center-based care, and for children less than two years of age and over two years. The state does not distinguish between group homes and centers.

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2)):

MSDE contracts with Maryland Family Network (MFN) to have a child care provider market rate survey completed each year. MFN publishes the data and shares it with MSDE every two years. The reported market rate data is compared to the payment rates set by MSDE to ensure that the rates do not exceed the amount paid by the public for the same service.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3)):

The State's co-payments are calculated as a percent of the average cost of care. Co-payments range from 5% to 50% for the youngest child in the family receiving care, and from 3% to 40% for the second and third children receiving care (fourth and subsequent children require no co-pay.) When expressed as a percent of total gross income, co-pays range from 1% to 15.7% of annual total gross income for the youngest and from 1% to 12.6% for second and third children. The average co-payment in February 2011 (considering only families with co-pays) was 14.8% of a family's gross income. Following are two examples for a family of three making \$1544 per month with 2 children in full-time family care, both over age two (co-pays are stated as monthly amounts).

Region with the Least Expensive Average Cost of Care (Payment Region V)

	First Child	Second Child	Combined
Co-Pay	\$105	\$82	\$187
% of Average Cost of Care	22%	18%	20%
Percent of Income	7%	6%	13%

Region with the Most Expensive Average Cost of Care (Payment Region X)

	First Child	Second Child	Combined
Co-Pay	\$194	\$151	\$345

% of Average Cost of Care	22%	18%	20%
Percent of Income	13%	10%	23%

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

None.

2.8 Goals for the next Biennium - In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and providers, building or expanding information technology systems, or revising rate setting policies or practices).

Note -When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

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Goal #1:

Expand capabilities of payment processing.

Goal #2:

Expand capabilities of case management technology.

Goal #3:

Increase standards for informal child care providers.

Goal #4:

Create a public portal for customers and providers.

PART 3

Health and Safety and Quality Improvement Activities

3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i)). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i)). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements

varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

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a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

Yes.

No.

Please identify the State or local (if applicable) entity/agency responsible for licensing:

b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

Licensing requirements serve as CCDF health and safety requirements for all providers of non-relative child care. All providers of non-relative child care are required to be licensed as a child care center, registered as a family child care home or a large family child care home.

c) Do the State/Territory's licensing requirements serve as the CCDF health and safety requirements?

	Center-Based Child Care	Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	Family Child Care	In-Home Care <input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory.
Yes, for all providers in this category	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Yes, for some providers in this category	Describe This applies to all providers in this category.	Describe This applies to all providers in this category.	Describe This applies to all providers in this category.	Describe N/A
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	Describe	Describe	Describe	Describe

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. **Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

CCDF Category of Care	CCDF Definition (§98.2)	Which providers in your State/Territory are subject to licensing under this CCDF category?	Are any providers in your State/Territory which fall under this CCDF category exempt from licensing?
Center-Based Child Care	Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work.	Describe which types of center-based settings are subject to licensing in your State/Territory All centers are required to be licensed.	Describe which types of center-based settings are exempt from licensing in your State/Territory. None.

<p>Group Home Child Care</p> <p>N/A. Check if your State/Territory does not have group home child care.</p> <p><input type="checkbox"/></p>	<p>Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work.</p>	<p>Describe which types of group homes settings are subject to licensing</p> <p>All group homes are required to be licensed.</p>	<p>Describe which types of group homes are exempt from licensing:</p> <p>None.</p>
<p>Family Child Care</p>	<p>Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work.</p> <p>Reminder - Do not respond if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.</p>	<p>Describe which types of family child care home providers are subject to licensing</p> <p>All family child care homes are required to be licensed.</p>	<p>Describe which types of family child care home providers are exempt from licensing:</p> <p>None.</p>

In-Home Care	In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements.	<input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing	Describe which types of in-home child care providers are exempt from licensing
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Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the NRCKid's website at <http://nrckids.org/CFOC3> to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's:**



e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care*.

*American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition.* Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online: <http://nrckids.org/CFOC3>

For each indicator, check all requirements for licensing that apply, if any.

Indicator	Center-Based Child Care	Group Home Child Care	Family Child Care	In-Home Care
		<input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home)

Do the licensing requirements include **child:staff ratios and group sizes?**

If yes, provide the ratio for age specified.

<input checked="" type="checkbox"/> Yes, Child:staff ratio requirement:	<input checked="" type="checkbox"/> Yes, Child:staff ratio requirement:	<input checked="" type="checkbox"/> Yes, Child: staff ratio requirement.	<input type="checkbox"/> Yes, Child: staff ratio requirement.
Infant ratio (11 months): 3:1	Infant ratio (11 months): 3:1 under age 2	List ratio requirement by age group: 2:1 under age 2, limit 4	List ratio requirement by age group:
Toddler ratio (35 months): 6:1	Toddler ratio (35 months): 6:1	<input type="checkbox"/> No ratio requirements.	<input type="checkbox"/> No ratio requirements.
Preschool ratio (59 months): 10:1	Preschool ratio (59 months): 10:1	<input checked="" type="checkbox"/> Yes, Group size requirement.	<input type="checkbox"/> Yes, Group size requirement.
<input type="checkbox"/> No ratio requirements.	<input type="checkbox"/> No ratio requirements.	List ratio requirement by age group: Maximum group size is 8.	<input type="checkbox"/> List ratio requirement by age group:
<input checked="" type="checkbox"/> Yes,	<input checked="" type="checkbox"/> Yes,	<input type="checkbox"/> No group size requirements.	<input type="checkbox"/> No group size requirements.
Group size requirement Infant group size (11 months): 6	Group size requirement Infant group size (11 months): 6		
Toddler group size (35 months): 12	Toddler group size (35 months): 9		
Preschool group size (59 months): 20	Preschool group size (59 months): 12		
<input type="checkbox"/> No group size requirements.	<input type="checkbox"/> No group size requirements.		

Do the licensing requirements identify specific experience and educational **credentials for child care directors?**

<input checked="" type="checkbox"/>	High school/GED	<input checked="" type="checkbox"/>	High school/GED	<input type="checkbox"/>	High school/GED
<input type="checkbox"/>	Child Development Associate (CDA)	<input type="checkbox"/>	Child Development Associate (CDA)	<input type="checkbox"/>	Child Development Associate (CDA)
<input type="checkbox"/>	State/ Territory Credential	<input type="checkbox"/>	State/ Territory Credential	<input type="checkbox"/>	State/ Territory Credential
<input checked="" type="checkbox"/>	Associate's degree	<input type="checkbox"/>	Associate's degree	<input type="checkbox"/>	Associate's degree
<input checked="" type="checkbox"/>	Bachelor's degree	<input type="checkbox"/>	Bachelor's degree	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	No credential required for licensing	<input type="checkbox"/>	No credential required for licensing	<input type="checkbox"/>	No credential required for licensing
<input checked="" type="checkbox"/>	Other:	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	Other:
	AA and BA depending upon size of facility; 9 clock hours preservice training in communication; 45 clock hours of approved administrative training. One or two years experience depending upon size of facility.		9 clock hours preservice training in communication; 45 clock hours of approved administrative training; 90 clock hours preservice training in early childhood education. One year of experience.		CPR/First Aid; SIDS; 24 clock hours of approved pre-service training and emergency and disaster planning training.

Do the licensing requirements identify specific educational **credentials for child care teachers?**

<input checked="" type="checkbox"/>	High school/GED	<input checked="" type="checkbox"/>	High school/GED	<input type="checkbox"/>	High school/GED
<input type="checkbox"/>	Child Development Associate (CDA)	<input type="checkbox"/>	Child Development Associate (CDA)	<input type="checkbox"/>	Child Development Associate (CDA)
<input type="checkbox"/>	State/ Territory Credential	<input type="checkbox"/>	State/ Territory Credential	<input type="checkbox"/>	State/ Territory Credential
<input type="checkbox"/>	Associate's degree	<input type="checkbox"/>	Associate's degree	<input type="checkbox"/>	Associate's degree
<input type="checkbox"/>	Bachelor's degree	<input type="checkbox"/>	Bachelor's degree	<input type="checkbox"/>	Bachelor's degree
<input type="checkbox"/>	No credential required for licensing	<input type="checkbox"/>	No credential required for licensing	<input type="checkbox"/>	No credential required for licensing
<input checked="" type="checkbox"/>	Other:	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	Other:
	90 clock hours of approved preservice training; 9 clock hours of approved preservice training in communication and 1 year experience.		90 clock hours of approved preservice training; 9 clock hours of approved preservice training in communication and 1 year experience.		45 clock hour Infant/Toddler class if approved for 3 or 4 children under the age of 2 years.

Do the licensing requirements specify that directors and caregivers must attain a specific number of training hours per year ?	<input type="checkbox"/>	At least 30 training hours required in first year	<input type="checkbox"/>	At least 30 training hours required in first year	<input type="checkbox"/>	At least 30 training hours required in first year
	<input type="checkbox"/>	At least 24 training hours per year after first year	<input type="checkbox"/>	At least 24 training hours per year after first year	<input type="checkbox"/>	At least 24 training hours per year after first year
	<input type="checkbox"/>	No training requirement	<input type="checkbox"/>	No training requirement	<input type="checkbox"/>	No training requirement
	<input checked="" type="checkbox"/>	Other:	<input checked="" type="checkbox"/>	Other:	<input checked="" type="checkbox"/>	Other:
		At least 12 hours per year in first and subsequent years.		At least 12 hours per year in first and subsequent years.		At least 18 hours in 1st year and 12 hours each subsequent year.

f) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

Yes.
Describe:

No.

3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

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- Yes. If "Yes" please refer to the chart below and check all that apply.
 No.

CCDF Categories of Care	Frequency of Routine Announced Visits	Frequency of Routine Unannounced Visits
<input checked="" type="checkbox"/> Center-Based Child Care	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe: During the initial and continuing application processes.	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe:
<input checked="" type="checkbox"/> Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe: During the initial and continuing application processes.	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe:

<input checked="" type="checkbox"/> Family Child Care Home	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe: During the initial and continuing application processes.	<input checked="" type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe:
<input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b)	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe:	<input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe:

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.

Yes. If "Yes" please refer to the chart below and check all that apply.

No.

Licensing Procedures	Describe which procedures are used by the State/Territory for enforcement of the licensing requirements.
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The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license.



Yes.

Describe:

All prospective applicants are required to participate in an orientation prior to submitting an application for licensure.



No.



Other.

Describe:

The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license.



An on-site inspection is conducted.



Programs self-certify.

Describe:



No procedures in place.



Other.

Describe:

Licensing staff has procedures in place to address violations found in an inspection.



Providers are required to submit plans to correct violations cited during inspections.



Licensing staff approve the plans of correction submitted by providers.



Licensing staff verify correction of violation.



Licensing staff provide technical assistance regarding how to comply with a regulation.



No procedures in place.



Other.

Describe:

Licensing staff has procedures in place to issue a negative sanction to a noncompliant facility.



Provisional or probationary license



License revocation or non-renewal



Injunctions through court



Emergency or immediate closure not through court action



Fines for regulatory violations



No procedures in place.



Other.

Describe:

The State/Territory has procedures in place to respond to illegally operating child care facilities.



Cease and desist action



Injunction



Emergency or immediate closure not through court action



Fines



No procedures in place.



Other.

Describe:

The State/Territory has procedures in place for providers to appeal licensing enforcement actions.

Yes.

Describe:

Intermediate sanctions, emergency suspensions, and revocations are appealable to the Office of the Attorney General.

No.

Other.

Describe:

c) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

Yes.If "Yes" please use refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency

No.

CCDF Categories of Care	Types of Background Check	Frequency	Who is Subject to Background Checks?
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<input checked="" type="checkbox"/> Center-Based Child Care	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Director
		<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Teaching staff
		<input checked="" type="checkbox"/> Other.	<input checked="" type="checkbox"/> Non-teaching staff
		Describe: Every two years.	<input type="checkbox"/> Volunteers
			<input type="checkbox"/> Other.
	<input checked="" type="checkbox"/> State/Territory Criminal Background	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Director
	<input checked="" type="checkbox"/> Check if State/Territory background check includes fingerprints	<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Teaching staff
		<input checked="" type="checkbox"/> Other.	<input checked="" type="checkbox"/> Non-teaching staff
	<input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.	<input type="checkbox"/> Volunteers
			<input type="checkbox"/> Other.
<input checked="" type="checkbox"/> Sex Offender Registry	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Director	
		<input checked="" type="checkbox"/> Teaching staff	
		<input checked="" type="checkbox"/> Non-teaching staff	

		<input type="checkbox"/> Checks Conducted Annually	<input type="checkbox"/> Volunteers
		<input type="checkbox"/> Other.	<input type="checkbox"/> Other.
		Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.	
		<input checked="" type="checkbox"/> Initial Entrance into the System	
		<input type="checkbox"/> Checks Conducted Annually	
		<input checked="" type="checkbox"/> Other.	
		Describe: MSDE has an arrangement with Criminal Justice Information System to obtain regular data reports of registered sexual offenders.	

<input checked="" type="checkbox"/> Group Child Care Homes	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Provider
<input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care.		<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Non-provider residents of the home.
	<input checked="" type="checkbox"/> State/Territory Criminal Background	<input checked="" type="checkbox"/> Other.	Residents of the home 18 years of age and older.
	<input checked="" type="checkbox"/> Check if the State/Territory background check includes fingerprints	Describe: Every two years.	
	<input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Provider
		<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Non-provider residents of the home.
	<input checked="" type="checkbox"/> Sex Offender Registry	<input checked="" type="checkbox"/> Other.	Residents of the home 18 years of age and older.
		Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.	<input checked="" type="checkbox"/> Provider
		<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Non-provider residents of the home.
		<input type="checkbox"/> Checks Conducted Annually	Residents of the home 18 years of age and older.
		<input checked="" type="checkbox"/> Other.	<input checked="" type="checkbox"/> Provider
			<input checked="" type="checkbox"/> Non-provider residents of the home.

		<p>Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.</p> <p><input checked="" type="checkbox"/> Initial Entrance into the System</p> <p><input type="checkbox"/> Checks Conducted Annually</p> <p><input checked="" type="checkbox"/> Other.</p> <p>Describe: MSDE has an arrangement with Criminal Justice Information System to obtain regular data reports of registered sexual offenders.</p>	Residents of the home 18 years of age and older.
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<input checked="" type="checkbox"/> Family Child Care Homes	<input checked="" type="checkbox"/> Child Abuse Registry	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Provider
		<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Non-provider residents of the home.
	<input checked="" type="checkbox"/> State/Territory Criminal Background	<input checked="" type="checkbox"/> Other.	Residents of the home 18 years of age and older.
	<input checked="" type="checkbox"/> Check if the State/Territory background check includes fingerprints	Describe: Every two years.	
	<input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Provider
	<input checked="" type="checkbox"/> Sex Offender Registry	<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Non-provider residents of the home.
		<input checked="" type="checkbox"/> Other.	Residents of the home 18 years of age and older.
		Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.	
		<input checked="" type="checkbox"/> Initial Entrance into the System	<input checked="" type="checkbox"/> Provider
		<input type="checkbox"/> Checks Conducted Annually	<input checked="" type="checkbox"/> Non-provider residents of the home.
		<input checked="" type="checkbox"/> Other.	Residents of the home 18 years of age and older.

		<p>Describe: All Criminal Background Checks conducted by the agency are fingerprint supported for both state and federal. Maryland has an automatic flagging system that triggers an immediate alert to the agency for any individual who is arrested or charged with an offense at any point after which the initial application has been made.</p> <p><input checked="" type="checkbox"/> Initial Entrance into the System</p> <p><input type="checkbox"/> Checks Conducted Annually</p> <p><input checked="" type="checkbox"/> Other.</p> <p>Describe: MSDE has an arrangement with Criminal Justice Information System to obtain regular data reports of registered sexual offenders.</p>	Residents of the home 18 years of age and older.
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<input type="checkbox"/> In-Home Child Care Providers	<input type="checkbox"/> Child Abuse Registry	<input type="checkbox"/> Initial Entrance into the System	<input type="checkbox"/> Provider
<input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e)		<input type="checkbox"/> Checks Conducted Annually	<input type="checkbox"/> Non-provider residents of the home.
		<input type="checkbox"/> Other.	N/A
		Describe:	<input type="checkbox"/> Provider
		<input type="checkbox"/> Initial Entrance into the System	<input type="checkbox"/> Non-provider residents of the home.
		<input type="checkbox"/> Checks Conducted Annually	N/A
		<input type="checkbox"/> Other.	
		Describe:	
		<input type="checkbox"/> Initial Entrance into the System	<input type="checkbox"/> Provider
		<input type="checkbox"/> Checks Conducted Annually	<input type="checkbox"/> Non-provider residents of the home.
		<input type="checkbox"/> Other.	N/A
		Describe:	
		<input type="checkbox"/> Initial Entrance into the System	
<input type="checkbox"/> Checks Conducted Annually	<input type="checkbox"/> Non-provider residents of the home.		
<input type="checkbox"/> Other.	N/A		
Describe:			
<input type="checkbox"/> State/Territory Criminal Background	<input type="checkbox"/> Check if the State/Territory background check includes fingerprints	<input type="checkbox"/> FBI Criminal Background (e.g., fingerprint)	<input type="checkbox"/> Sex Offender Registry

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d) Please **provide a brief overview** of the State/Territory's process for conducting background checks for child care. In this brief overview, include the following:

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d -1) The cost associated with each type of background check conducted:

A full criminal background check [Maryland State and FBI] costs \$34.

d-2) Who pays for background checks:

The person applying for the background check pays for the cost. If the applicant is employed by a child care center, the center operator may reimburse the applicant for the background check cost.

d-3) What types of violations would make providers ineligible for CCDF? Describe:

The following offenses are automatic bars to employment in a child care facility or service as a child care provider:

- (1) A crime involving:
 - (a) A child;
 - (b) Cruelty to animals;
 - (c) Domestic violence; or
 - (d) A weapons or firearms violation of federal or state laws;

- (2) A sex offense;
- (3) A violent crime classified as a felony;
- (4) Abduction or kidnapping;
- (5) Abuse of a child or an adult;
- (6) Confinement of an unattended child;

(7) Manufacturing, distributing, or dispensing a controlled dangerous substance;

(8) Perjury;

(9) Pornography;

(10) Possession with intent to manufacture, distribute, or dispense a controlled dangerous substance; or

(11) Reckless endangerment.

If the person has a criminal history that does not include one of the offenses listed above, the agency assesses, on the basis of the following factors, the person's suitability for employment:

- (1) The job position at the child care facility for which the person is applying or in which the person

is currently employed;

- (2) The nature and seriousness of the incident, crime, or offense;
- (3) How long ago the incident, crime, or offense occurred;
- (4) The person's age at the time the incident, crime, or offense occurred;
- (5) The person's probation or parole status, if applicable; and

(6) Any other information the agency considers pertinent.

d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Describe:

A person who is prohibited by the agency from employment in a child care facility or as a child care provider may appeal that decision to the Maryland Office of Administrative Hearings. Also, if the employment prohibition is based on a criminal history that does not include one of the automatic bars to employment listed above under (d-3), the person may request the agency to conduct a reassessment of the person's history. A reassessment request must be in writing and must include documentation, such as but not limited to letters of support or evaluation reports.

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? Describe (658E(c)(2)(E), §98.40(a)(2))

All relative providers are subject to a Child Protective Services background consent and check to look for any history of abuse and neglect. The Department of Human Resources Services Unit conducts the check and indicates whether or not there is any history. All relative providers and household members are cross-referenced with the Sex Offender registry.

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other "search tools," about child care program licensing status and compliance records?

Effective Date: 01-OCT-13

Yes.

Describe:

The MSDE website www.marylandpublicschools.org and the licensing compliance website <http://www.checkcmd.org/> provide information to parents and the public such as lists of licensed providers in Maryland, provider compliance records, child care regulations, early learning guidelines and other resource documents.

No

3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)



Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

a) **Describe** the Lead Agency's health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.				
The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Physical exam or health statement for providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Physical exam or health statement for children	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tuberculosis check for providers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tuberculosis check for children	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<input checked="" type="checkbox"/> Provider immunizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Child immunizations	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Hand-washing policy for providers and children	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Diapering policy and procedures	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<input checked="" type="checkbox"/> Other. Describe: Maryland requires relatives and in-home providers to review and sign a health and safety checklist to protect children in care. There is a checklist signature page for both the parent the provider to sign. The provider must indicate all of the children in care, including their own, on the page, as well as the address where the care is provided. All children in care must verify that they have up-to-date immunizations before care can begin. We do not currently have training requirements, but are planning to implement a basic program that includes first aid and child development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply.

The Lead Agency requires:	Center-based child care providers	Family child care home providers	Group home child care providers	In-home child care providers
<input checked="" type="checkbox"/> Fire inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Building inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Health inspection	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Inaccessibility of toxic substances policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Safe sleep policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tobacco exposure reduction	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Transportation policy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other.				
Describe:				

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). 'On-going' would be some type of routine occurrence (e.g., maintain qualifications each year).

CCDF Categories of Care	Health and safety training requirements	Pre-Service	On-Going
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Child Care Centers

First Aid

At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved: Basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved; and Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid and CPR as specified in child care regulations.

At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved: Basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved; and Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid and CPR as specified in child care regulations.

CPR

At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved: Basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved; and Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid and CPR as specified in child care regulations.

At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved: Basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved; and Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid and CPR as specified in child care regulations.

	Medication Administration Policies and Practices	Medication Administration Training is required for identified staff members who administer medication to children. Only those staff members trained in Medication Administration may administer medication.	Core of Knowledge areas include Health and Safety and Medication Administration. Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan.
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	SIDS Prevention and Safe Sleep procedures training is required of all staff members caring for infants on or before the first day of employment.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Health and Safety and Safe Sleep/SIDS Prevention.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A

	Physical Activities	Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes physical activity content.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on physical activity and obesity prevention.
	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been informed in writing about all areas pertinent to the health and safety of the children, including training on handwashing to prevent infectious diseases.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Health and Safety and infectious disease prevention.
	Recognition and mandatory reporting of suspected child abuse and neglect	By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been trained in the requirements and procedures for reporting suspected child abuse and neglect including signs and symptoms of abuse and neglect in children, according to Family Law Article 5-704 -5-705, Annotated Code of Maryland.	Child Abuse and Neglect Reporting training is offered to meet annual Core of Knowledge training requirements for each staff member (aide, teacher, director) and consistent with their individual professional development plan for number of clock hours.

	Emergency preparedness and planning response procedures	Emergency and Disaster Planning is a mandated pre-service training requirement.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on emergency preparedness and response and disaster planning.
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes working with and inclusion of children with special needs or disabilities.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on inclusion of children with special needs and working with children with specific identified health and developmental needs.

	<p>Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.</p>	<p>Child Care Teachers and Directors must meet a minimum 90 clock hours of required training, of which 45 hours is in Child Development.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Child Development.</p>
	<p>Supervision of children</p>	<p>Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes supervision of children.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include supervision of children.</p>
	<p>Behavior management</p>	<p>By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been informed in writing about all areas pertinent to the health and safety of the children, including training on the center's discipline (behavior management) policy.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on behavior management. Child Care teachers and directors are required to complete a 90 clock hour training that includes children's behavior management.</p>

	Other Describe:		
Group Home Child Care	First Aid	At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid as specified in child care regulations.	At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved basic first aid training through the American Red Cross, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved first aid as specified in child care regulations.

	CPR	<p>At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved CPR as specified in child care regulations.</p>	<p>At all times, including during an offsite activity, at least one child care teacher or the director shall be present who holds a current certificate indicating successful completion of approved Cardiopulmonary resuscitation (CPR) training through the American Heart Association, or a program with equivalent standards, which is appropriate to all child age groups for which the center is approved. A center with an approved capacity of more than 20 children shall have in attendance, in a ratio of at least one staff member for every 20 children present, staff members who are currently certified in approved CPR as specified in child care regulations.</p>
	Medication Administration Policies and Practices	<p>Medication Administration Training is required for identified staff members who administer medication to children. Only those staff members trained in Medication Administration may administer medication.</p>	<p>Core of Knowledge areas include Health and Safety and Medication Administration. Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan.</p>

	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	SIDS Prevention and Safe Sleep procedures training is required of all staff members caring for infants on or before the first day of employment.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Health and Safety and Safe Sleep/SIDS Prevention.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes physical activity content.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on physical activity and obesity prevention.

	<p>Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods</p>	<p>By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been informed in writing about all areas pertinent to the health and safety of the children, including training on handwashing to prevent infectious diseases.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Health and Safety and infectious disease prevention.</p>
	<p>Recognition and mandatory reporting of suspected child abuse and neglect</p>	<p>By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been trained in the requirements and procedures for reporting suspected child abuse and neglect including signs and symptoms of abuse and neglect in children, according to Family Law Article 5-704-5-705, Annotated Code of Maryland.</p>	<p>Child Abuse and Neglect Reporting training is offered to meet annual Core of Knowledge training requirements for each staff member (aide, teacher, director) and consistent with their individual professional development plan for number of clock hours.</p>

	Emergency preparedness and planning response procedures	Emergency and Disaster Planning is a mandated pre-service training requirement.	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on emergency preparedness and response and disaster planning.
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes working with and inclusion of children with special needs or disabilities	Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on inclusion of children with special needs and working with children with specific identified health and developmental needs

	<p>Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.</p>	<p>Child Care Teachers and Directors must meet a minimum 90 clock hours of required training, of which 45 hours is in Child Development.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include Child Development.</p>
	<p>Supervision of children</p>	<p>Child care teachers and directors must meet a minimum requirement for 90 clock hours of training that includes supervision of children.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include supervision of children.</p>
	<p>Behavior management</p>	<p>By regulation, on or before assignment, an operator shall ensure and document that each employee and staff member has been informed in writing about all areas pertinent to the health and safety of the children, including training on the center's discipline (behavior management) policy.</p>	<p>Each staff person (aide, teacher, director) is required to complete a number of clock hours within the Core of Knowledge areas each year of employment and consistent with their individual professional development plan. Core of Knowledge areas include content on behavior management. Child Care teachers and directors are required to complete a 90 clock hour training that includes children's behavior management.</p>

	<table border="1"> <tr> <td data-bbox="430 33 788 85">Other</td> </tr> <tr> <td data-bbox="430 85 788 185">Describe: N/A</td> </tr> </table>	Other	Describe: N/A	N/A	N/A
Other					
Describe: N/A					
Family Child Care Providers	First Aid	An individual who applies for an initial registration must hold a current certificate indicating successful completion of training in Basic First Aid through the American Red Cross or a program with equivalent standards.	Current certification in approved Basic First Aid as specified in Maryland's child care regulations must be maintained at all times by the provider and, if applicable, the additional adult.		
	CPR	An individual who applies for an initial registration must hold a current certificate indicating successful completion of training in approved Cardiopulmonary Resuscitation (CPR) through the American Heart Association or a program with equivalent standards.	Current certification in CPR as specified in Maryland's child care regulations must be maintained at all times by the provider and, if applicable, the additional adult.		

	Medication Administration Policies and Practices	N/A	Family child care providers and any additional staff persons (aide, co-provider additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Health and Safety area includes content on Medication Administration for child care providers.
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	If requesting approval to provide care for children younger than 24 months old, the provider must present evidence of successful completion, within 5 years before the date of the request, approved training in Sudden Infant Death Syndrome.	Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. Core of Knowledge Health and Safety area includes SIDS Prevention and Safe Sleep practices.
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A

	<p>Age appropriate nutrition, feeding, including support for breastfeeding</p>	<p>The 24 clock hour preservice training requirement for family child care providers includes information in the Health, Safety and Nutrition module regarding the principles of nutritionally balanced, age-appropriate menu planning for children.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Health, Safety and Nutrition area includes content on child nutrition</p>
	<p>Physical Activities</p>	<p>The pre-service orientation and 24 clockhour training for family child care providers includes content on regulations for physical activity and in the Child Development and Curriculum Modules content includes the importance of physical activity in curriculum planning and scheduling.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Child Development and Curriculum areas include content on the importance of physical activity and childhood obesity prevention.</p>

	<p>Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods</p>	<p>Training on infectious disease prevention is included in the 24 clock hour pre-service requirement for family child care providers and is also included in the required orientation for family child care providers.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. Infectious disease prevention is included in the Health and Safety Core of Knowledge area.</p>
	<p>Recognition and mandatory reporting of suspected child abuse and neglect</p>	<p>Training on requirements for mandatory reporting of suspected child abuse or neglect is included in the 24 clock hour pre-service requirement for family child care providers and is also included in the required orientation for family child care providers.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Professionalism area includes content on mandatory reporting requirements for suspected child abuse or neglect for child care providers.</p>

	<p>Emergency preparedness and planning response procedures</p>	<p>By regulation, the Office of Child Care shall not approve an initial registration application unless the applicant has completed approved training on emergency and disaster planning. The 24 clock hour preservice training requirement includes information in the Health, Safety and Nutrition module on understanding the components of a plan to respond to emergency situations and developing a plan with required components.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Health, Safety and Nutrition area includes content on emergency and disaster planning and procedures</p>
	<p>Management of common childhood illnesses, including food intolerances and allergies</p>	<p>N/A</p>	<p>N/A</p>
	<p>Transportation and child passenger safety (if applicable)</p>	<p>N/A</p>	<p>N/A</p>

	<p>Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act</p>	<p>The 24 clock hour preservice training requirement for family child care providers includes a module on Special Needs which introduces the participant to basic information on meeting the requirements of the Americans with Disabilities Act (ADA), establishing an inclusive child care environment and meeting the needs of all children in care.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Special Needs area includes content on working with children with special needs or disabilities.</p>
	<p>Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.</p>	<p>The 24 clock hour preservice training requirement includes basic information on theories of child development, developmental stages and milestones.</p>	<p>Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Child Development area focuses on training related to developmental theory, child growth and development milestones and strategies of applying developmental knowledge to program planning.</p>

Supervision of children

The 24 clock hour preservice training requirement for family child care providers includes information in the Professionalism module on the provider's responsibility in supervising children including the need to intervene to promote safety.

Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Child Development area includes major concepts, principles, theories and research related to the development of children, infants through thirteen years, that enable family child care providers to construct learning opportunities that support a child's individual development, acquisition of knowledge and motivation. The Core of Knowledge Professionalism area includes content on safety and supervision of children.

	Behavior management	The 24 clock hour preservice training requirement for family child care providers includes information in the Professionalism and Child Development modules regarding appropriate behavior expectations for ages and activity levels of children. The Curriculum and Special Needs modules identify methods and activities reflecting the ages and stages of development and how behavior is managed through appropriate learning activities, environment and interactions.	Family child care providers and any additional staff persons (aide, co-provider, additional adult) are required to complete a number of clock hours within the Core of Knowledge areas each year of registration/employment and consistent with their individual professional development plan. The Core of Knowledge Child Development area includes content on behavior management.
	Other: Describe: N/A	N/A	N/A
In - Home Child Care	First Aid	N/A	N/A
	CPR	N/A	N/A
	Medication Administration Policies and Practices	N/A	N/A
	Poison Prevention and Safety	N/A	N/A
	Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention	N/A	N/A
	Shaken Baby Syndrome and abusive head trauma prevention	N/A	N/A
	Age appropriate nutrition, feeding, including support for breastfeeding	N/A	N/A
	Physical Activities	N/A	N/A

	Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods	N/A	N/A
	Recognition and mandatory reporting of suspected child abuse and neglect	N/A	N/A
	Emergency preparedness and planning response procedures	N/A	N/A
	Management of common childhood illnesses, including food intolerances and allergies	N/A	N/A
	Transportation and child passenger safety (if applicable)	N/A	N/A
	Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act	N/A	N/A
	Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services.	N/A	N/A
	Supervision of children	N/A	N/A
	Behavior management	N/A	N/A
	Other	N/A	N/A
	Describe: N/A		

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii)(A))

- All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
- Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
- Relative providers are subject to certain requirements.

Describe the different requirements:

e) Provide a web address for the State/Territory's health and safety requirements, if available:

www.marylandpublicschools.org/MSDE/divisions/child_care/regulat

3.1.4 Effective enforcement of the CCDF health and safety requirements. For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements. [On-site visits are not conducted for license exempt providers. Background checks are conducted for child abuse and neglect and cross-referenced with the sex offender registry. A health and safety packet must be read and signed by both the customer and provider and returned to the LDSS. Providers caring for children receiving child care subsidies that are identified as having an abuse and neglect finding, are identified as being on the sex offender registry, or any violations of health and safety requirements are given adverse action and can no longer provide services.](#)

a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced)

[N/A](#)

b) Describe whether the Lead Agency uses background checks

[Child abuse and neglect checks are conducted and sex offender registry is cross-referenced.](#)

c) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?

Yes. If yes, what documentation, if any, is required?

Describe:

[Informal child care providers are required to submit a signed health and safety packet.](#)

No

d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements

[No.](#)

Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

3.1.5 Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs? Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities..

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Yes.
Describe

No
a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

Yes.
Describe

No
 Other.
Describe

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

Yes.
Describe

No
 Other.
Describe

c) Does the State/Territory use developmental screening and referral tools?

Yes. If Yes, provide the name of the tool(s)

- No
 Other.
Describe

3.1.6 Data & Performance Measures on Licensing and Health and Safety

Compliance - What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children)).

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a) **Data on licensing and health and safety.** Indicate if the Lead Agency or another agency has access to data on:

Number of licensed programs.

Describe (optional):

The number of licensed programs, by jurisdiction and type, are provided on the MSDE web-site and are updated on a monthly basis.

http://www.marylandpublicschools.org/MSDE/divisions/child_care/Reports.htm

Numbers of programs operating that are legally exempt from licensing.

Describe (optional):

Number of programs whose licenses were suspended or revoked due to non-compliance.

Describe (optional):

Number of injuries in child care as defined by the State/Territory.

Describe (optional):

Number of fatalities in child care as defined by the State/Territory.

Describe (optional):

Number of monitoring visits received by programs.

Describe (optional):

Caseload of licensing staff.

Describe (optional):

Number of programs revoked from CCDF due to non-compliance with health and safety requirements.

Describe (optional):

Other.

Describe:

None.

b) **Performance measurement.** What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements?

Maryland uses a fully electronic inspection system to capture, analyze, and profile the complete set of results from every licensing inspection, and to match those results against the results of previous inspections of the same program. Among these items, the agency pays particular attention to any regulatory noncompliance in the areas of child supervision, child capacity, child protection, and group size/staff-child ratios. Each of the agency's routine annual unannounced inspections is structured to require a complete review of a specific subset of compliance items that are highly correlated with the preservation of child health and safety.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. Through analysis of the data collected by the agency's electronic inspection system (see the response to 3.1.6(b)), patterns of noncompliance related to child health and safety are readily identified both with respect to individual program performance across all compliance items (aggregated and subaggregated)

and to item-specific performance across all programs (also aggregated and subaggregated). In this way, an individual program's compliance strengths and weaknesses are highlighted, and the ability of programs to comply with a given compliance item can also be easily assessed. Agency licensing staff rely on both these perspectives to identify and meet the individual and collective training and technical assistance needs of programs; and, where indicated, to pursue appropriate license enforcement actions. These analyses are conducted on a continual basis through specialized automated reporting from the electronic inspection system's database.

3.1.7 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

Note -When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

Effective Date: 01-OCT-13

Goal #1:

Establish standards for In-Home Providers to meet minimum training requirements and Criminal Background Checks.

Goal #2:

Establish procedures and protocols for the implementation of child screening tools.

Goal #3:

Refer more programs for technical assistance to improve compliance with state regulations.

NEW!

CCDF has a number of performance measures that are used to track progress for key

aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please follow this link <http://www.acf.hhs.gov/programs/occ/resource/government-performance-and-results-act-gpra-measures> to see the CCDF performance measures. A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have added a ruler icon



in Section 3.2 through 3.4 order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.



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- Birth-to-three
- Three-to-five
- Five years and older
- None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

www.marylandhealthybeginnings.org ;

http://www.marylandpublicschools.org/MSDE/divisions/child_care/early_learning/MMSR.htm ;

<http://www.mdk12.org/instruction/curriculum/index.html>

Which State/Territory agency is the lead for the early learning guidelines?

Maryland State Department of Education

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development? Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

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Domains	Birth-to-Three ELGs	Three-to-Five ELGs	Five and Older ELGs
Physical development and health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social and emotional development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Approaches to learning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Logic and reasoning (e.g., problem-solving)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Language development	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Literacy knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mathematics knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Science knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Creative arts expression (e.g., music, art, drama)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Social studies knowledge and skills	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
English language development (for dual language learners)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
List any domains not covered in the above:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other. Describe:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.2.3 To whom are the early learning guidelines disseminated and in what manner? Check all audiences and methods that your State/Territory has chosen to use in the chart below.

	Information Dissemination	Voluntary Training	Mandatory Training
Parents in the child care subsidy system	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parents using child care more broadly	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in child care centers	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Providers in family child care homes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in Early Head Start	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in public Pre-K program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practitioners in elementary schools	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other. List:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

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- To define the content of training required to meet licensing requirements
 - To define the content of training required for program quality improvement standards (e.g., QRIS standards)
 - To define the content of training required for the career lattice or professional credential
 - To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
 - To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
 - To develop State-/Territory -approved curricula
 - Other.
- List:

None.

3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system? Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

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- Cross-walked to align with Head Start Child Development and Early Learning Framework
- Cross-walked to align with K-12 content standards
- Cross-walked to align with State/Territory pre-k standards
- Cross-walked with accreditation standards
- Other.

List:

None.

3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions. In this section, assessment is framed with two distinct purposes/tools - 1) ongoing assessment of children's progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

Effective Date: 01-OCT-13

a) Are programs required to conduct ongoing assessments of children's progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

Yes.

Describe:

Kindergarten teachers administer the MD Model For School Readiness (MMSR) during the first 6 weeks of school. The MMSR was based on the Work Sampling System. Title I schools also administer a Spring MMSR. Teachers continue to collect evidence of children's progress through the year using observational rubrics, work samples, and performance tasks.

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children's needs?

Yes.

Describe:

Teachers are trained to use students evidence of performance to plan instruction that meets each individual child's needs.

No

Other.

Describe:

a-2) If yes, is information on child's progress reported to parents?

Yes.

Describe:

Parents receive a report indicating their child's level of readiness at the domain level base during the fall assessment. Evidence of progress is shared at parent conferences throughout the year.

No

Other.

Describe:

No

Other.

Describe:

b) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

Yes.

Describe:

Maryland assesses the readiness of all children entering kindergarten each fall through the MMSR Work Sampling System (WSS). Since the implementation of the WSS assessments in 2001-2002 the school readiness of children in the State has increased from 49% fully ready (2001-2002) to 82% fully ready in 2012-2013, due in part to the availability and implementation of the Guidelines, MMSR and other quality initiatives.

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

Yes.

Describe:

The MMSR contains the developmental domains of Personal and Social Development, Language and Literacy, Mathematical Thinking, Scientific Thinking, Social Studies, The Arts and Physical Development and Health.

No

Other.
Describe:

b-2) If yes, are the tools used on all children or samples of children?

All children.

Describe:

All children entering kindergarten are assessed for level of mastery across seven learning domains through the MMSR.

Samples of children.

Describe:

Other.

Describe:

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

Yes.

Describe:

Information collected from the Work Sampling System (WSS) assessments of children entering kindergarten are used to develop quality improvement initiatives and for strategic planning.

No

Other.
Describe:

No

Other.
Describe:

c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

Yes.

Describe:

The data from the MMSR Kindergarten Assessment for the school years 2001-02 to 2012-2013 are part of the Maryland Longitudinal Data System Data Warehouse.

No

Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines (Click for additional instructions)

Effective Date: 01-OCT-13

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

Number/percentage of child care providers trained on ELG's for preschool aged children.

Describe (optional):

Number/percentage of child care providers trained on ELG's for infants and toddlers.

Describe (optional):

Number of programs using ELG's in planning for their work.

Describe (optional):

Number of parents trained on or served in family support programs that use ELG's.

Describe (optional):

Other.

Describe:

None.

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

Increase the number of infant/toddler caregivers trained in the use of the birth to five early learning guidelines.

c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The information gained on school readiness when children enter kindergarten will be used with the state's Longitudinal Data System to link school readiness with previous care provided by trained caregivers to determine the effectiveness of quality improvements.

3.2.8 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

Effective Date: 01-OCT-13

Goal #1:

Increase dissemination of Early Learning Guidelines to include pediatricians, public school administrators and other identified sources.

Goal #2:

Increase the number of infant/toddler caregivers trained in the Early Learning Guidelines birth to five years.

3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3) (Click for additional instructions)

Effective Date: 01-OCT-13


a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

Maryland State Department of Education, Division of Early Childhood Development, Johns Hopkins University - Center for Technology in Education

3.3.1 Element 1 - Program Standards

Definition - For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.

Effective Date: 01-OCT-13

 a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

- Ratios and group size
- Health, nutrition and safety
- Learning environment and curriculum
- Staff/Provider qualifications and professional development
- Teacher/providers-child relationships
- Teacher/provider instructional practices
- Family partnerships and family strengthening
- Community relationships
- Administration and management
- Developmental screenings
- Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- Cultural competence
- Other.

Describe:

Inclusive Child Care Practices

- None. If checked, **skip to 3.3.2.**

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

- Children with special needs as defined by your State/Territory
- Infants and toddlers
- School-age children
- Children who are dual language learners
- None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and

licensing requirements.

- Licensing is a pre-requisite for participation
- Licensing is the first tier of the quality levels
- State/Territory license is a "rated" license.
- Other.

Describe:

- Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

- Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
- Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)

- Other.

Describe:

- None.

3.3.2 Element 2 - Supports to Programs to Improve Quality

Definition - For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.

Effective Date: 01-OCT-13

a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, **skip to 3.3.3.**

- None. **skip to 3.3.3.**

Types and Purposes of Support	Information or Written Materials	Training	On-Site Consultation
<input checked="" type="checkbox"/> Attaining and maintaining licensing compliance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Attaining and maintaining accreditation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas:			
Health and safety	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Infant/toddler care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
School-age care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Inclusion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Teaching dual language learners	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mental health	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Business management practices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Other. Describe: <div style="border: 1px solid black; height: 15px; width: 100%;"></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b) Methods used to customize quality improvement supports to the needs of individual programs include:

- Program improvement plans
- Technical assistance on the use of program assessment tools
- Other.

Describe:

A team of Quality Assurance Specialists has been hired to provide individualized technical assistance and on-site consultation to meet the needs of individual providers and programs entering and moving

through the quality levels in all regions of the state. The statewide network of Child Care Resource and Referral staff also provides support and technical assistance to programs entering and moving through the quality levels.

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

Yes.

Describe:

Coordinated and state-approved training on credentialing, accreditation and quality improvement activities provided through Child Care Resource and Referral agencies and Quality Assurance Specialists. Technical assistance is targeted to those who are entering into Maryland's QRIS and to those already participating who may need additional assistance in moving forward.

No


Other.

Describe:

3.3.3 Element 3 - Financial Incentives and Supports

Definition - For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.

Effective Date: 01-OCT-13

 a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, **skip to 3.3.4.**

None. **skip to 3.3.4.**


Types of Financial Incentives and Supports for Programs	Child Care Centers	Child Care Homes	License-Exempt Providers
<input checked="" type="checkbox"/> Grants to programs to meet or maintain licensing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Grants to programs to meet QRIS or similar quality level	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<input checked="" type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> On-going, periodic grants or stipends tied to improving / maintaining quality	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Tax credits tied to meeting program quality standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.3.4 - Element 4 - Quality Assurance and Monitoring

Definition - For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.

Effective Date: 01-OCT-13

 a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

None. **skip to 3.3.5.**

Types of Program Quality Assessment Tools	Child Care Centers	Child Care Homes	License-Exempt Providers
---	--------------------	------------------	--------------------------

<input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. <input type="text" value="Yearly."/>	<input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input checked="" type="checkbox"/> School-Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments. <input type="text" value="Yearly."/>	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<input checked="" type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes Describe, including frequency of assessments. <input type="text" value="Yearly."/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21st Century Learning Center programs Describe, including frequency of assessments. <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other. Describe: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?


- Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- Include QRIS or other quality reviews as part of licensing enforcement
- Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- Other.
Describe:

None.

3.3.5 - Element 5 - Outreach and Consumer Education

Definition - For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.

Effective Date: 01-OCT-13

 a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

Yes. If yes, how is it used?

Resource and referral/consumer education services use with parents seeking care

Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting

Searchable database on the web

Voluntarily, visibly posted in programs

Mandatory to post visibly in programs

Used in marketing and public awareness campaigns

Other.

Describe:

[Mobile App for families to identify programs participating in QRIS in family's home, work or commute/travel routes.](#)

No. If no, **skip to 3.3.6.**

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.



Print



Radio



Television



Web



Telephone



Social Marketing



Other.

Describe:



None.

c) Describe any targeted outreach for culturally and linguistically diverse families.

The Lead Agency does not have any targeted outreach planned for culturally and linguistically diverse families at this time.

3.3.6. Quality Rating and Improvement System (QRIS)

Effective Date: 01-OCT-13



a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5**, does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.



Participation is voluntary for:

[Licensed and registered programs and public pre-kindergarten.](#)



Participation is mandatory for:

Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.

State/Territory is in the development phase

State/Territory has no plans for development



Other.

Describe:



b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:



Child care centers



Group child care homes



Family child care homes



In-home child care



License exempt providers



Early Head Start programs



Head Start programs



Pre-kindergarten programs



School-age programs



Other.

Describe:

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above,

Effective Date: 01-OCT-13

please describe:

N/A

3.3.8 Data & Performance Measures on Program Quality (Click for additional instructions)

Effective Date: 01-OCT-13

a) Data on program quality. Indicate if the Lead Agency or another agency has access to data on:



Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory.

Describe(optional)

Data are captured in the Maryland EXCELS QRIS System and in the Child Care Administrative Tracking System.



Number of programs that move program quality levels annually (up or down).

Describe(optional)

Data are captured in the Maryland EXCELS QRIS System and in the Child Care Administrative Tracking System.



Program scores on program assessment instruments.

List instruments:

Environment Rating Scales, Program Administration Scale, Business Administration Scale.

Describe(optional)

Program scores are captured on Excels spreadsheets and will be captured in the Maryland EXCELS QRIS System.



Classroom scores on program assessment instruments.

List instruments:

Environment Rating Scales, CLASS

Describe(optional)

Classroom scores are captured on Excels spreadsheets.



Qualifications for teachers or caregivers within each program.

Describe(optional)

Information is captured in the Child Care Administrative Tracking System.



Number/Percentage of children receiving CCDF assistance in licensed care.

Describe(optional)

Information is captured in the Child Care Administrative Tracking System.



Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory



Number/Percentage of programs receiving financial assistance to meet higher program standards.

Describe(optional)

Information is captured in the Child Care Administrative Tracking System and on Excel spreadsheets.



Other.

Describe:



None.

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures on program quality?

Program quality performance measures are incorporated in the state's revised QRIS standards, Maryland EXCELS, in five areas: Licensing/Compliance, Staffing and Professional Development, Rating Scales/Accreditation, Developmentally Appropriate Learning and Practice/Child Assessment and Administrative Practices and Policies.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

Johns Hopkins University Center for Technology in Education, working in conjunction with MSDE, has developed a QRIS Evaluation Study to conduct a formative evaluation of the QRIS model and academic research into the quality, effectiveness and impact of QRIS models. The evaluation plan includes development of a logic model for all aspects of QRIS administration.

3.3.9 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

Effective Date: 01-OCT-13

Goal #1:

Program Standards:

Complete Guide to Early Childhood Pedagogy

Implement School-Age Accreditation Standards

Goal #2:

Support to Programs to Improve Quality:

Provide technical assistance through the Resource and Referral Agencies and family support centers on Maryland EXCELS, accreditation, mental health consultation and infant/toddler specialists.

Revised QRIS – Maryland EXCELS, accreditation, mental health consultation and infant/toddler specialists.

Goal #3:

Financial Incentives and Support:

Maintain current levels of funding on quality improvement programs in place: Credentialing, Tiered Reimbursement, training voucher/reimbursement, accreditation support and child care provider grants.

Goal #4:

Quality Assurance and Monitoring:

Increase the number of observers and monitors for approved trainers, Maryland EXCELS, ERS, CLASS, BAS, PAS, Accreditation and MMSR to support various quality improvement initiatives and monitoring activities.

Goal #5:

Outreach and Consumer Education:

Increase the methods for disseminating information into new areas, in addition to the MSDE website, MSDE Partners newsletter, Child Care Resource and Referral agencies and print materials. Establish a benchmark percentage of pediatricians' offices that will obtain information for dissemination to families.

3.4 Pathways to Excellence for the Workforce - Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

- 1) Core Knowledge and Competencies
- 2) Career Pathways (or Career Lattice)
- 3) Professional Development Capacity
- 4) Access to Professional Development
- 5) Compensation, Benefits and Workforce Conditions

Effective Date: 01-OCT-13

a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

[Maryland State Department of Education, Division of Early Childhood Development](#)

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

Definition - For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.

Effective Date: 01-OCT-13



a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

- Yes
- No, the State/Territory has not developed core knowledge and competencies. **Skip to question 3.4.2.**
- Other.

Describe:

If yes, insert web addresses, where possible:

http://www.marylandpublicschools.org/MSDE/divisions/child_care/credentials/outcomes

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

- Child growth, development and learning
- Health, nutrition, and safety
- Learning environment and curriculum
- Interactions with children
- Family and community relationships
- Professionalism and leadership
- Observation and assessment
- Program planning and management
- Diversity
- Other.

Describe:

[MSDE State Accreditation, Inclusive child care for children with special needs](#)

None.

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

- To define the content of training required to meet licensing requirements
- To define the content of training required for program quality improvement standards (as reported in section 3.3)
- To define the content of training required for the career lattice or credential
- To correspond to the early learning guidelines
- To define curriculum and degree requirements at institutions of higher education
- Other.

Describe:

None.

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

- Cross-walked with the Child Development Associate (CDA) competencies
- Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)

Cross-walked with apprenticeship competencies

Other.

Describe:

None.

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers.

Describe:

Aides are required to complete 6 clock hours of entry level training within 6 months of hire. The training covers basic child development, supervision, child abuse and reporting, health and safety, proper child supervision, workplace professionalism and interacting with parents. Assistant teachers have completed 9 clock hours of approved pre-service training in communicating with staff, parents and the public and according to the individual's professional development plan, complete annual continued training in Core of Knowledge areas. Competency outcomes are listed here:

<http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/23826/Commun0310.pdf>

Child Care Teachers in a Preschool setting have completed 6 semester hours or 90 clock hours or their equivalent of approved pre-service training or hold the Child Development Associate Credential and 9 clock hours of approved pre-service training in communicating with staff, parents and the public. Child care teachers may hold an associate's degree or higher with approved courses in early childhood education. A Child Care Teacher in a preschool shall, according to the individual's professional development plan, complete approved training in Core of Knowledge areas. Competencies for the Child Growth and Development 45 hour portion of the 90 hour course are listed here:

<http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/29134/GrowDev071811.pdf>

Competencies for the Curriculum Methods and Materials 45 hour portion of the 90 hour course are listed here:

<http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/29137/PSmethmat071811.pdf>

Child Care Teachers supervising a group of infants or toddlers, in addition to above requirements, has completed 3 semester hours of approved training, or the equivalent, related exclusively to the care of infants and toddlers. Competency outcomes are listed here:

<http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/29136/ITCareDev071811.pdf>

Child Care Teachers in School Age Centers have successfully completed 6 semester hours or 90 clock hours or their equivalent of approved pre-service training, 9 clock hours of approved pre-service training in communicating with staff, parents and the public. Child Care Teachers in School Age Centers, according to the individual's professional development plan, must complete approved continued training in Core of Knowledge areas. Competencies for the School Age 45 hour course are listed here: <http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/29138/SAmethmat071811.pdf>

Providers working directly with children in family child care homes, including aides and assistants.
Describe:

Family child care providers must complete 24 clock hours of training prior to receiving a registration. The training covers basic child development, curriculum planning, record keeping and business practices, health, safety and nutrition, professionalism, special needs and community resources. Competencies and outcomes for the family child care provider 24 hour pre-service training are listed here: <http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/20259/FCC24hrMod.pdf>

During the first year of registration family child care providers must complete 18 clock hours of specified training in Child Development, Working with Mixed Age Groups, Health, Safety and Nutrition and Emergency Preparedness

Administrators in centers (including educational coordinators, directors).
Describe:

Directors of all child care centers have successfully completed 9 clock hours of approved pre-service training in communicating with parents, staff and the public and 3 semester hours or their equivalent of approved administrative training. Directors of all child care centers must have successfully completed 6 semester hours or 90 clock hours, or their equivalent, or approved pre-service training, or hold the Child Development Associate Credential. According to the individual's professional development plan, complete approved continued training of at least 12 clock hours per full year of employment as a director of Core of Knowledge training. Competencies and outcomes for Directors are listed here: <http://www.marylandpublicschools.org/NR/rdonlyres/09BEB371-2BC7-41C1-A78F-9A277975AE6C/23829/DirAdmin0310.pdf>

Directors of Preschool Centers in addition to the requirements listed above, in a preschool center with infants or toddler in care, shall have 3 semester hours of approved training or the equivalent related exclusively to the care of infants and toddlers. In a preschool center with 21 to 40 children, a director shall have completed 30 semester hours of college coursework that has not less than 20 semester hours specifically in early childhood education or 60 semester hours from an accredited institution of higher learning and applicable experience according to regulation. In a preschool center with more than 40 children, a director shall have attained an associate's degree with a minimum of 15 semester hours of approved course work in early childhood education or a bachelor's degree in any field and appropriate experience.

Directors of School Age Centers and Directors in Combined Preschool and School Age Centers - by regulation, specific requirements for experience with school age populations apply to directors of school age centers and combined preschool and school age centers. Specific requirements are located at

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).

Describe:

Under a contract between the Lead Agency and Maryland Family Network, technical assistance providers located in the state's regional Child Care Resource and Referral network must meet specific qualifications comparable with the approved trainer qualifications. Technical assistance providers complete content training in the area/s where mentoring, coaching or consulting will be provided.

Education and training staff (such as trainers, CCR&R staff, faculty).

Describe:

Trainers: The Lead Agency has established procedures for approval of trainers and training content for family child care provider and child care staff training. Types of training fall under three main categories: Pre-service training, Core of Knowledge Training and Continued Training. Individuals applying to offer approved training to the child care community are required to attend a Maryland Trainer Orientation and must meet requirements for both education and experience as outlined in the Maryland Training Information Packet: http://www.marylandpublicschools.org/NR/rdonlyres/EC34ABE7-4719-481B-8929-B752D719A350/22295/TrgApprovInfoPkt_Nov09.pdf

Trainers approved by the Lead Agency to offer child care training may elect to include technical assistance and support as part of their training proposal.

Other.

Describe:

None.

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

Birth-to-three

Three-to-five

Five and older

Other.


Describe:

None.

3.4.2 Workforce Element 2 - Career Pathways

Definition - For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.

Effective Date: 01-OCT-13

 a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

Yes.

Describe:

The Maryland Child Care Credential recognizes child care providers who go beyond the requirements of State licensing and registration. There are seven credential levels and four administrator levels, each one recognizes a child care provider's achievement of a specified number of training hours, years of experience and professional activities. Child care providers participating in the program will complete training in topic areas to develop the knowledge and skills they need to provide the highest quality care for the children and families they serve. Staff Pre-Service training requirements are included in the career pathway. On-going training requirements are included for aides, assistants, teachers, directors and family child care providers.

No, the State/Territory has not developed a career pathway. **Skip to question 3.4.3.**

Insert web addresses, where possible:

http://marylandpublicschools.org/MSDE/divisions/child_care/credentials/

b) Check for which roles, if any, the career pathway (or lattice) include qualifications, specializations or credentials.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers.

Describe:

Staff Credential Levels 1 through 6 - 13A.14.09 Maryland Child Care Credential Program Staff qualifications – Subtitle 16, Chapters 01-19, Child Care Centers (COMAR 13A.16.01-.19), http://www.marylandpublicschools.org/MSDE/divisions/child_care/regulat

Providers working directly with children in family child care homes, including aides and

assistants.

Describe:

Staff Credential Levels 1 through 6 - 13A.14.09 Maryland Child Care Credential Program Staff qualifications - Subtitle 15, Chapters 01-15, Family Child Care (COMAR 13A.15.01-.15), http://www.marylandpublicschools.org/MSDE/divisions/child_care/regulat

Administrators in centers (including educational coordinators, directors).

Describe:

Administrator Credential Levels 1 through 4 - 13A.14.09 Maryland Child Care Credential Program, http://www.marylandpublicschools.org/MSDE/divisions/child_care/regulat

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).

Describe:

Education and training staff (such as trainers, CCR&R staff, faculty).

Describe:

Qualifications for providing approved training - COMAR 13A.14.08 Child Care Training Approval, http://www.marylandpublicschools.org/MSDE/divisions/child_care/regulat

Other.

Describe:

None.

c) Does the career pathway (or lattice) include specializations or credentials, if any, for working with any of the following children?

Infants and toddlers

Preschoolers

School-age children

Dual language learners

Children with disabilities, children with developmental delays, and children with other special needs

Other.

Describe:

None.

d) In what ways, if any, is the career pathway (or lattice) used?

Voluntary guide and planning resource

Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13

Required placement for all practitioners working in programs that receive public funds to serve children birth to 13

Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)

Required placement for participation in scholarship and/or other incentive and support programs

Required placement for participation in the QRIS or other quality improvement system

Other.

Describe:

In the Lead Agency's agreement with the statewide Child Care Resource and Referral Network, staff providing training and technical assistance to the child care community meet education and experience requirements as outlined in the agreement. The Lead Agency approves trainers who provide professional development and technical assistance to child care providers and who meet professional requirements for education and experience as required by the Lead Agency.

None.

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice)?

Yes.

If yes, describe:

Documentation is submitted and reviewed.


No.

3.4.3 Workforce Element 3 - Professional Development Capacity

Definition - For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the

provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.

Effective Date: 01-OCT-13


 a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

Yes.

If yes, describe:

MSDE has a partnership with two-year and four-year Colleges/Universities that have degree programs in early-childhood education and school-age care. The Lead Agency's Child Care Career and Professional Development Fund coordinator maintains communication regarding current enrollment and anticipated student enrollment with the fund coordinators at the participating colleges and universities. MSDE meets with the local community colleges and four-year colleges to assess the availability of early childhood and school age programs.

No.

 b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

Yes.

If yes, describe:

MSDE has a contract with the Maryland Family Network to provide training and technical assistance to licensed programs through the statewide Child Care Resource and Referral agencies. Maryland Family Network conducts an annual survey of child care providers to assess availability of early childhood and school-age training and publishes a training calendar and resources for providers and families at www.mdchildcare.org

No.

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

Standards set by the institution

Standards set by the State/Territory higher education board

- Standards set by program accreditors
- Standards set by State/Territory departments of education
- Standards set by national teacher preparation accrediting agencies
- Other.

Describe:

- None.

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

- Training approval process.

Describe:

The Lead Agency monitors the contract requirements for training and technical assistance conducted by the Maryland Family Network Child Care Resource and Referral sites. The Lead Agency has established policies and requirements for training approval including education and experience for trainers. All training content must meet requirements set forth by the Lead Agency and is monitored by the Lead Agency's Training Approval Coordinator. A committee of approved trainers meets regularly to evaluate training proposals and to make recommendations regarding their approval. An established rubric is followed to ensure that training meets the expectations of the Lead Agency and that content and delivery is consistent and of high quality. Lead Agency staff visit training sessions to monitor for quality assurance.

- Trainer approval process.

Describe:

MSDE's Office of Child Care Training Approval Coordinator reviews applications from proposed trainers based on education, skills, and experience. Individuals applying to become approved trainers must attend an orientation conducted by the Lead Agency and must meet all requirements as outlined in the Maryland Trainer Information Packet for education and experience. Approved trainers attend quarterly training meetings conducted by the Lead Agency's Training Approval Coordinator to keep them informed about upcoming training needs for the child care community and training development opportunities. The Lead Agency has approved over 100 trainers for the state.

- Training and/or technical assistance evaluations.

Describe:

MSDE's Office of Child Care Training Approval Committee reviews and evaluates training proposals for content, organization and presentation according to an established rubric. The Lead Agency staff monitors approved trainers by unannounced visits to training sessions and by informing the child care community via online and mailed publications regarding how to file a complaint about a training session that did not meet the participant's expectations for content advertised. Through the Lead Agency's contract monitoring protocols, training and technical assistance offered through the Maryland Family Network's Child Care Resource and Referral agencies is conducted.

Other.
Describe:

None.

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

Yes.

If yes, describe:

A statewide articulation agreement is in place between 2- and 4-year colleges and universities that allows the transfer of course credits from one institution to another. The agreement covers coursework completed for the Associate of Arts in Teaching (AAT) - Early Childhood degrees. Students completing the AAT degree may transfer to a 4-year college or university without any loss of credit and will not have to retake any course that was successfully passed.

No.

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

Yes.

If yes, describe:

There is a signed articulation agreement between the state and two and four year colleges in addition to many public high schools. The Associate of Arts in Teaching (AAT) is a fully articulated degree between two and four year colleges.

No.

3.4.4 Workforce Element 4 - Access to Professional Development

Definition - For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.

Effective Date: 01-OCT-13



a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

- Yes. If yes, for which sectors?
- Child care
- Head Start/Early Head Start
- Pre-Kindergarten
- Public schools
- Early intervention/special education

Other.
Describe:

No.

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

Yes.

If yes, describe:

The Maryland Family Network is the State-wide clearing house. The local Resource and Referral agencies provide training, technical assistance and information on the availability, location and the quality of child care programs

No.

Insert web addresses, where possible: <http://www.mdchildcare.org/mdcfc/mcc.html>

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

Scholarships.

Describe:

The Child Care Career and Professional Development Fund is available to child care providers and center staff who are participating in the Credentialing Program, to pursue a college degree in early childhood education, education for children, child development, family studies, or related disciplines.

Free training and education.

Describe:

Roundtables are held at local Regional Licensing Offices and public libraries on various topics of interest and importance for child care providers.

Reimbursement for training and education expenses.

Describe:

Training Vouchers/Reimbursements are available to providers participating in the Credentialing program at Level Two or higher.

Grants.

Describe:

Loans.

Describe:

Loan forgiveness programs.

Describe:

Substitute pools.

Describe:

Release time.

Describe:

Other.

Describe:

Co-sponsoring and/or underwriting statewide training opportunities to defray costs for child care providers.

None.

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

Yes.

If yes, describe:

Child Care Career and Professional Development Fund Coordinators are located at various Colleges and Universities to assist students with their professional development plan.

No.

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

Yes.

If yes, describe:

Early Childhood Mental Health Consultants, Resource and Referral Technical Support, Infant Toddler Specialists and Family Support Centers.

No.

3.4.5 Workforce Element 5 - Compensation, Benefits and Workforce

Conditions Definition - For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.

Effective Date: 01-OCT-13




a) Does the State/Territory have a salary or wage scale for various professional roles?

Yes.

If yes, describe:

No.


 b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

Yes.

If yes, describe:

The Maryland Child Care Credentialing program provides achievement bonuses paid to the participating provider upon the completion of continued training, professional activity and one year of continued employment. Bonuses are paid one time only at levels Staff Credential Levels 2, 3 and 4. Administrator Achievement bonuses are paid one time only at Level 1.

No.

 c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

Yes.

If yes, describe:

The Maryland Child Care Credentialing program provides a bonus paid to the participating provider upon the completion of continued training, professional activity and one year of continued employment. Bonuses are paid annually at Staff Credential Levels 4+, 5 and 6. Administrator Achievement bonuses are paid annually at levels 2, 3 and 4.

No.

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

Yes.

If yes, describe:

No.

3.4.6 Data & Performance Measures on the Child Care Workforce - What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children)).

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a) Data on the child care workforce. Indicate if the Lead Agency or another agency has access to data on:

Data on the size of the child care workforce.
Describe (optional):

Information is captured in the [Child Care Administrative Tracking System \(CCATS\)](#) for all licensed programs.

Data on the demographic characteristics of practitioners or providers working directly with children.
Describe (optional):

Information is captured in the [Child Care Administrative Tracking System \(CCATS\)](#) for all licensed programs.

Records of individual teachers or caregivers and their qualifications.
Describe (optional):

Information is captured in the [Child Care Administrative Tracking System \(CCATS\)](#) for all licensed programs.

Retention rates.
Describe (optional):

Records of individual professional development specialists and their qualifications.
Describe (optional):

Information is captured in the [Child Care Administrative Tracking System \(CCATS\)](#) for all licensed programs.

Qualifications of teachers or caregivers linked to the programs in which they teach.
Describe (optional):

Information is captured in the Child Care Administrative Tracking System (CCATS) for all licensed programs.

Number of scholarships awarded .
Describe (optional):

Data is captured on EXCEL spreadsheets kept by the Lead Agency.

Number of individuals receiving bonuses or other financial rewards or incentives.
Describe (optional):

Data is captured on EXCEL spreadsheets kept by the Lead Agency.

Number of credentials and degrees conferred annually.
Describe (optional):

Data is captured on EXCEL spreadsheets kept by the Lead Agency.

Data on T/TA completion or attrition rates.
Describe (optional):

Data is captured on EXCEL spreadsheets kept by the Lead Agency.

Data on degree completion or attrition rates.
Describe (optional):

Data is captured on EXCEL spreadsheets kept by the Lead Agency.

Other.
Describe:

None.

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition - For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

Staff working directly with children in centers, including aides, assistants, teachers, master teachers.

Describe:

The Child Care Administrative Tracking System (CCATS) captures information for all staff working in child care facilities. Mandatory

Providers working directly with children in family child care homes, including aides and assistants.

Describe:

The Child Care Administrative Tracking System (CCATS) captures information for all staff working in child care facilities. Mandatory

Administrators in centers (including educational coordinators, directors).

Describe:

The Child Care Administrative Tracking System (CCATS) captures information for all staff working in child care facilities. Mandatory

Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.).

Describe:

Education and training staff (such as trainers, CCR&R staff, faculty).

Describe:

The Child Care Administrative Tracking System (CCATS) captures information for individuals approved to offer training to child care staff. The information captured in CCATS does not include faculty and staff employed by a college or university. Mandatory

Other.

Describe:

None.

b-2) Does the workforce data system apply to:

all practitioners working in programs that are licensed or regulated by the State/Territory to serve children birth to 13?

all practitioners working in programs that receive public funds to serve children birth to age 13?

No.

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

Increased participation in the Maryland Child Care Credentialing program and an increase in the number of providers at the various credentialing levels.

Increased participation in the Child Care Career and Professional Development Fund and an increase in the number of providers graduating with a degree in early childhood education.

d) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

Johns Hopkins University Center for Technology in Education, working in conjunction with MSDE, has developed a QRIS Evaluation Study to conduct a formative evaluation of the QRIS model and academic research into the quality, effectiveness and impact of QRIS models. The evaluation plan includes development of a logic model for all aspects of QRIS administration, including the workforce and professional development system. The system will allow the State to gain information concerning the qualifications of staff, their participation in the Maryland Child Care Credentialing program (professional development) and link that to the school readiness of the children that were in their care.

3.4.7 Goals for the next Biennium -

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Note -When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

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Goal #1:

Core of Knowledge and Competencies:

Increase access and availability of new training to the child care community.

Implement the revision to the Maryland Child Care Credentialing Core of Knowledge requirements.

Develop an articulation agreement for pre-service coursework between MSDE approved trainers and community colleges.

Revise data system to implement all changes.

Goal #2:

Career Pathways:

Implement individual credentialing and alternative certification for Child Care Teachers.

Strengthen pathways for teacher education by improving access to and transfer out of the Associate of Arts in Teaching (AAT) - Early Childhood.

Goal #3:

Professional Development Capacity:

Provide funding through the Child Care Career and Professional Development Fund (CCCPDF) for providers and center staff to attain degrees in early childhood education or related fields.

Continue to provide technical assistance to child care providers and center staff through regional child care resource and referral agencies.

Goal #4:

Access to Professional Development:

Continue to provide access to a statewide training calendar with approved trainers and organizations offering approved training for professional development.

Continue to provide information on early childhood conferences throughout the state.

Conduct Early Learning Leadership Academies for early childhood programs serving pre-school age children.

Goal #5:

Compensation, benefits and workforce conditions:

Continue to provide achievement bonuses and vouchers for training.

